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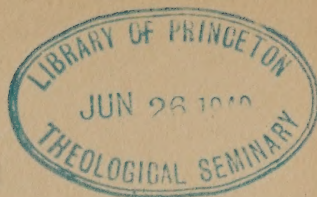
# PSYCHOLOGY SERVING RELIGION

A Practical Guide  
to  
Life Adjustments

RICHARD D. HOLLINGTON



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HOLLINGTON  
PSYCHOLOGY SERVING RELIGION

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DEDICATED TO M. T. H.  
MY WIFE





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## INTRODUCTION

### PURPOSE, PLAN, AND SCOPE

**O**F the making of books on psychology there seems to be no end. Vocational guidance, education, sociology, and even psychiatry have been treated from the standpoint of applied psychology in numerous volumes. Some psychologists have dealt with certain religious problems objectively, with no reference to the validity or reality of the religious experiences, but as yet no text has appeared which carries the principles and techniques of genetic psychology into the realm of the development of personality in relation and adjustment to spiritual realities.

The purpose of this present work is to put into the hands of the average person the scientific knowledge of human life which may be used in understanding and dealing with the personal problems that he may be called upon to solve for himself, or in aiding others. The idea here developed distinguishes this book from the many pseudopsychological or scientific "short cuts" to success, or "Ways to Win Personality," in that it attempts to present and arrange in logical order the authoritative knowledge of all the physical, mental, moral, and spiritual elements which enter into personality, and offers guidance in life adjustments on the basis of this knowledge.

This manual offers a textbook in this wide field so far as this knowledge can be condensed within reasonable

limits, and gives guidance to further and wider studies by lists of the latest and most authoritative literature on special branches of the subject.

The position taken in relation to psychology is very eclectic. As a rule, the standpoints of the different schools are stated on each debatable subject, and, without settling theoretical questions, the most practical solution is given on the basis of facts. Religion is regarded here in its most catholic interpretation as the relation of personality to the ultimate spiritual Person, and questions of dogma, creed, religious organization, and purely theoretical theology are not considered.

The complex life of today with its speed, its intensity, and variety of interests, together with the dissemination by books, the radio, and the press of partial, prejudiced, and questionable statements on physical, moral, and religious problems, has greatly increased the number and the complexity of the problems with which every person has to deal, and emphasizes the necessity for an interpretation of religion which shall carry the modern knowledge of physical, mental, and moral life into the service of the highest demands of the soul.

The author wishes to express his gratitude to Dr. Harris Franklin Rall, of Garrett Biblical Institute, for having read the manuscript and making valuable suggestions, and also to the two psychiatrists who gave the author many important insights which are embodied in the book.

The author is also indebted to Harper and Brothers, Publishers, for permission to use the quotation from *Psychology and the Promethean Will*, by W. H. Sheldon; and to D. Appleton-Century Company, for permis-



sion to use the quotation from *The Wholesome Personality*, by W. H. Burnham; also to Professor Harold W. Ruopp for permission to use his classification of religious difficulties; also to Methuen and Company, London, for permission to use the quotation from *Religion and Morbid Mental States*, by H. I. Schou.



BOOK I  
THE GENESIS OF THE SOUL





## CHAPTER I

### THE MARCH OF THE SOUL FROM MYTH TO MASTERY

THE early Greeks had a religion of myths about forces which they had personified and deified, and one of these persons was "Psyche," who represented the principle of life connected with the body. In the religious myth "Psyche" was a beautiful young girl with wings, who was beloved by Eros, who was love personified. But myth soon succumbed to the search for knowledge. In plain, common speech "Psyche" was the "breath," the "life," the "living spirit," and for the Greeks "logos" was the word for ordered knowledge or science, and putting the two together they arrived at "psychology"—the science or knowledge of the soul. From this early birth and baptism, as psychology, the study of the soul has gone through a vast and varied career.

The great Greek Plato developed his psychology from his doctrine of ideas, and for him the psyche included reason, will, appetite, and self-control. In the Middle Ages, when scholastic learning was dominant, psychology was twisted into mental and moral philosophy as a basis for metaphysics. Modern psychology, as distinguished from philosophy, began in the early nineteenth century and ran an erratic course through "phrenology," materialistic "psychology without a soul," "spiritualism," "monism," and Lotze's "teleological idealism." As a really scientific study, Fechner, Wundt, and Weber in Germany, Höffding in Denmark, and

James and Ladd in the United States began an investigation of the relation of consciousness to the bodily structure and called their work physiological psychology.

The present schools show two main currents, or streams: the psychology of consciousness; which includes the introspectionists such as the intuitionists and personalists, the structural psychologists, including the "Gestalt school" and the functional psychologists. The other line is the psychology of Behavior, which concerns itself with the objective study of behavior, its origin, development, analysis, and structure.

In the most modern texts there is an inclusion of the study of both consciousness and behavior, and psychology is defined as the science of the mutual interrelations of the "organism as a whole" and its environment.

The study of psychology has now become largely experimental with a process of specialization incident to the growth of new schools, each school having its own peculiar method and outlook and to a considerable extent its own vocabulary.

In some of these fields there has been a distinct tendency to recognize the mental or at least nonphysical factors in the individual. To be sure, in most medical schools psychiatry is still taught on the basis of physical neurology, but there is a definite trend toward a wider inclusion of mental factors. William A. White has adopted the term "The Organism as a Whole" for the individual, and especially in his later writings has emphasized the intellectual and the affective factors of feeling and emotion in mental diseases.

Bridge's formulating psychology for medical students,



includes the elements of feeling, emotion, and ideational states in the development of personality. Sadler, in his *Psychiatry*, in dealing with the psychoneuroses puts much emphasis on religious assurance, and has declared that he would not attempt to treat a man who does not believe in God.

In educational psychology there is a decided demand for a more comprehensive view of education as character building. Most emphatic is the insistence of personality growth and character synthesis for the child beginning at very early years.

There has been of late a decided turning toward religion by practicing psychologists. C. G. Jung has stated in his *Modern Man in Search of a Soul* that most of the mental illnesses of his patients were due to loss of religious outlook, and that recovery was conditioned upon the regaining of that religious experience. Henry C. Link, in his amazingly popular book, *The Return to Religion*, states that in his very extensive experience he discovered that the most successful methods of treatment were really in their origin religious. In a recent volume by W. H. Sheldon entitled *Psychology and the Promethean Will*,<sup>1</sup> he very accurately states the relation of psychology and religion. "Psychology and religion together actually carry the common general function of integrating feeling with intellect. A good psychological mind is simply one which possesses insight into itself and other minds, and religion is the application of such insights to the conflicts which are causing the greatest blockage of the general development of mind." Stu-

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<sup>1</sup> From *Psychology and the Promethean Will*, by W. H. Sheldon, Harper & Brothers. Used by permission.

dents of religion have not been slow to avail themselves of the new knowledge of life furnished by psychology.

The adoption of psychological principles in religious methods dates from the work of Hadfield, an English psychologist, in 1926. This was followed by McKenzie's *Souls in the Making*, in 1928. Since then a large number of works interpreting religion in terms of psychology have appeared; these works have covered almost every field in which the forces and power of spiritual life could be understood. Especially fruitful has been the work of spiritual psychotherapy under the pioneer developments of Weatherhead.

From both the theoretical and practical standpoints, psychology and religion have come closely together, and a thinking man who would be both religious and scientific must have a definite fundamental knowledge of both fields. It is with this purpose that this present work is prepared. It is definitely not a psychology of religion, but is an attempt to organize the matter and method of modern psychology in such a way as to make the material and techniques of psychology available in dealing with life problems. The method of procedure of study is almost inevitable and makes up the four divisions or books of the work. First, psychogenesis, or the genesis of the soul; second, normal adjustments to the whole environment; third, maladjustments, or failures to adjust; and fourth, readjustment, including all methods of counsel and therapy.

## CHAPTER II

### WHY ARE WE WHAT WE ARE PHYSICALLY?

PSYCHOLOGY, as it is studied and taught in academic halls, today is turning largely to biology and mathematics. One of the largest universities has on its psychological staff a professor of mathematical biophysics, one in experimental physics, a social psychology statistician, and a number of other men for special experimental work. In time there will be developed a more exact and rounded science of psychology. But this psychology will be that of a human mind shut up in a laboratory and abstracted from all the conditions of human life, save the one particular talent or faculty to be experimented with or measured.

There is another field in which a study is made of man in his relation to other human beings, and which seeks causes for action: not *how* a man does so and so, which is descriptive psychology, but *why* he does so and so, which is called genetic psychology. This point of view consists of studying the beginnings, the origins, and the chains of causes which force men on in life. It answers the question, Why are we what we are? by making a study of all the elements—physical, mental, spiritual—which make up our life.

Genetic psychology assumes that if we know all the perceptions, associations, feelings, and emotions in a certain situation, a certain action must necessarily follow. To this extent it is deterministic, in that everything has a genesis or cause, but these causes may be



deeper than our own immediate chosen experiences. We did not pick out the knowledge which our early instruction provided. We did not create those brain dispositions and talents and tendencies which lead us to decisions and drive us to certain actions. We must hold firmly in mind that while certain causes result in certain effects this is far from fatalism, either materialistic or spiritual. All influences which create a sentiment of independence and self-respect are *causes* which influence decision; the will in itself becomes, then, an original self-directed *cause*. This genesis holds also in spiritual matters. All religious instruction, inspiration, and example become *causes*, and the religious life is the *result* of the interaction of spiritual influences on and with all the other forces which enter into life.

To discover why we are what we are we must begin with the physical basis. No one deals in ordinary life with disembodied spirits. Even the saints have bodies, and the riddle is, Does soul help body more than body helps soul? The popular answer, "Born that way!" does not suffice, for our genesis begins back before birth in a union of male and female in the process of conception, and the conduct and manner of that conception, to some extent, affects our lives in the prenatal period.

The "old wives' tale" of the "birthmarks" produced by sights or mental shocks experienced by the pregnant mother, must be largely discounted. Such stigmata are not easily attained, and soon someone will be explaining to an expectant mother that these "marks" are all made by the way "sister is born," or "when they have to use forceps."

The recent discovery of the action of the emotions on

the endocrine glands (activity stimulators) has given the explanation why emotional conditions during the act of conception have a direct bearing on the new life. The act done as simple convenience, in fear, antipathy, repugnance, or contrariwise with nuptial enthusiasm, has an effect on the glands which in turn may stimulate or inhibit (retard) the maternal supply of nourishment to the child.

Bianchi, the Italian neurologist (specialist in diseases of the nerves), seems to have clearly established that conception, while under the influence of intoxicants, is definitely detrimental to the child, and he goes so far as to state that matrimony should be forbidden to those addicted to alcohol and to those chronically affected by it. He classifies alcoholism with tuberculosis, active syphilis, and depleting illnesses as bars to marriage.

On close observation there seems to be some relation between the emotional attitude of the parents toward the unborn child and the emotional stability of the child after birth. "Little Unwanted" may suffer physically from unsuccessful attempts to abort, which produce congenital (acquired before or at birth) defects, or the repulsion may result in a poor blood supply from a mother whose emotions are set against the unborn. "Little Accident" may suffer mildly from the same handicap, while, on the contrary, a child who is a wanted, wished for, and welcome guest in the home seems to reflect the gladness of the home.

The medical care during the prenatal period and childbirth is divided between the gynecologist (an M. D. who specializes in the diseases of women), the obstetrician (who specializes in the delivery of the child), and

the pediatrician (whose specialty is the medical care of children). This medical care should include tests for pregnancy, for blood pressure, and urinalysis for presence of certain diseases. Later there must be measurements and X-ray photographs of the bony structure of the pelvis in relation to the head of the foetus, and diet to build up the vitality of the mother. Most obstetricians now use a mild anesthetic to relieve the severe pains of later childbirth, and there are physicians who now find it possible to produce a complete anesthesia, securing a painless birth after the preliminary pains are over, thus bringing a great relief to the suffering fathers! Medical science should now be able to instill a sense of safety and security in the minds of expectant parents.

The next step in physical genesis is the study of heredity. Heredity is the receiving of the direct stream of protoplasm from parents. The male spermatozoon fertilizes the female ovum producing the embryo.

This stream of protoplasm carries in itself the direct contribution of all of one's ancestors and in the tenth generation every person has 1,024 grandparents. In each cell, male and female, there is a nucleus made up of linear threads of protoplasm called chromosomes; these are divided into strings of beads called genes, and are 1,000 to an inch. Dr. Raymond B. Fosdick, president of the Rockefeller Foundation for Biological Research, said recently: "It has been estimated that if all the human sperm (father) cells which are to be responsible for the 2,000,000,000 individuals who will constitute the next generation were gathered together, they would occupy the space of half an aspirin tablet.

"If, of the corresponding female egg cells, only the



nuclei, which carry the stuff of life, be taken, they too would occupy the same space. It may be said, therefore, that the original and essential substance for the development of 2,000,000,000 individuals could be contained in a capsule no larger than an aspirin tablet."

The genes are paired, one from the father and one from the mother, and each gene has a definite order, always occupies the same place and always has the same function. Traits carried by a normal gene are called dominant, or manifested, and traits carried by a defective gene are called recessive. It takes two defective genes paired to produce a trait which is recessive.

The modern conceptions of heredity are almost wholly and directly due to the work of H. S. Jennings, of Johns Hopkins University, whose deviation from the current biological theories of determinism offers some hope in dealing with heredity.

The basis of his discussion is in the conclusion that any pair of parents can produce millions of different combinations of genes, each combination being a child of different characteristics, so that there is not a single fated unit of characters received, but the line-up of each parent must meet the line-up of the other parent, and this combination will bring about strikingly diverse characteristics in the offspring, which throws much light on why children are not like their parents and why two children in the same family may differ so greatly. There is here also understanding of what is so often sadly noticed—the coming of an imbecile child to perfectly normal parents with other perfectly normal children in the family. This happens only when a defective gene in one parent is paired with a defective gene in the other

parent and is not "an act of God," or "punishment for our sins."

Superior parents may thus be afflicted with feeble-minded children when they themselves do not show any taint. Studies in the children of feeble-minded parents show that these children do not always inherit the defects of the parent. Fernauld has shown that children of feeble-minded parents have become officeholders, and even two have become professors.

As to direct inheritance of the parents defects: if the disease is due to some defect in the hereditary constituent, it is inherited; otherwise it is not. Certain diseases run in families and have the appearance of being inherited, but when the specific cause of disease is some micro-organism, the child must have been infected at some time or other almost invariably after birth. The ovary and the testicle, the guardians of the genes, are exposed to infection and impart certain quality of defect by injury to the vitality of the gene. Or the infection may be caused through the blood stream of the mother directly to the embryo, producing a child with infection though not by direct inheritance. Syphilis impairs the germ plasm and produces defects in development as a result.

Children born of insane, feeble-minded, tubercular, alcoholic, syphilitic, epileptic, or neurasthenic parents are at least at a disadvantage, and in a vast majority of cases seem to have an inborn predisposition to abnormality, although that abnormality may not always be of the same nature as that of the parents. This is recognized by the practice, now very common, of speaking of the neurasthenic diathesis (a bodily condition which pre-

disposes some special development), the syphilitic diathesis, the tubercular diathesis, etc. Most students are agreed that in human affairs, four or five generations are as long as any known human hereditary defects can be proven to exist.

The most recent studies in heredity can be summed up in a few statements:

1. The packet of genes which each individual inherits contains innumerable possibilities, and which of the possible characteristics will be developed depends on environment. The environment affects and exerts pressure on the genetic line-up so that the resulting characteristics will depend on the relation between the genes and the particular surroundings of the individual.

2. The physical mechanism of the nervous system is inherited, but it can function only with reference to the environment. We inherit structure but not the functions of that structure. It is probable that nerve and muscle co-ordination may be inherited, and may be responsible for certain talents, such as musical performance, dancing, or delicate mechanics. Heredity plays a strong part in determining the organic, chemical, and neural economy of the whole organism, thus influencing the supply and transmission of energy and general health. The intellectual aspect of a talent is not inheritable, neither are certain moral traits.

The whole matter is summed up in the reputed reply of Bernard Shaw to a most beautiful American actress who suggested that a combination of Shaw's brains and her beauty ought to be preserved in some child genius for posterity. To which the cynical Irishman replied, "But what if the child have my beauty and your brains?"

3. The theory of the multiplicity of genes and consequent vast variety of possible characteristics of children of the same parents accounts for the fact of such decidedly different children in the same family, and also makes futile any definite statement as to what a certain child will be like because he comes from certain parents. In one prominent minister's family are two sons, one a prominent writer and clergyman, the other a wastrel alcoholic.

4. This modern understanding of heredity rather weakens the argument of the eugenists. J. B. L. Haldane, in his recent volume, *Heredity and Politics*, states that sterilization of all supposedly hereditary mental defectives would probably not cut down the supply in the next generation by more than ten per cent. He also says that to prevent the birth of one child doomed to schizophrenia (a major form of insanity), it would be necessary to sterilize about sixteen schizophrenics and prevent the birth of ten normal children.

Raymond Pearl declares that the vast majority, in absolute numbers, of the most superior people in the world's history have, in fact, been produced by mediocre or even in many cases inferior forebears; and, furthermore, the admittedly most superior folk have in the main been singularly unfortunate in their progeny. Jennings says that capitalists will continue to produce artists, poets, socialists, laborers; laboring men will give birth to capitalists, to philosophers, to men of science. Fools will produce wise men, and wise men will produce fools.

The human body is a continued complex, chemical activity which is described as metabolism. The living



cells undergo chemical changes by which energy is provided for the vital process. This rate of change can be discovered by metabolic tests, and just as a fire may burn too brightly or dies out, so the vital process may be too fast or too slow. A basal expenditure of energy has been established and by metabolic tests the rate at which the human fire is burning may be determined. There are in the body certain glands which furnish the necessary chemicals for heat and energy metabolism and for the preparation of materials for growth and repair. Because the secretions of the ductless glands are discharged directly into the blood, they are called the glands of internal secretion or endocrines. The secretions are usually called hormones (excitors) and the secretion of each gland excites one and only one type of activity in the body.

There are seven endocrines proper: thyroid, parathyroid and thymus in the neck; pituitary and pineal in the head; adrenals and spleen in the abdomen. But it is not yet proved that the thymus, pineal, and spleen are true glands. The pituitary controls blood pressure and converts energy; under secretion causes dwarfs and over secretion giants. Thymus controls sexual activities and may cause moral deficiency. The sex glands, the testes and ovaries, change at puberty. The adrenals, astride the kidneys, secrete cortin and adrenalin, which pour into the blood stream in rage, fear, or pain. Chronic adrenal insufficiency causes irritability and peevishness. The thyroid gland secretes the hormone thyroxin which is an iodine compound, and this gland controls hairiness, moisture, and growth of the skull and brain. By metabolic tests the percentage of thy-

roxin can be determined. A deficiency of thyroid to minus 10 is not abnormal, but a deficiency of minus 40 to minus 70 produces cretins. A plus rate indicates over secretion and whips up activity, producing high-strung, "burned out" subjective personalities.

There has been a sudden recent increase in endocrinology or the study of the glands, especially of the thyroid. It is quite definitely held by medical authorities that neurasthenia, with symptoms of apathy, exhaustion, and sluggishness, may be occasioned by thyroid deficiency, and there are conditions of hyperthyroidism (too much thyroxin) which can be treated medically or by surgical excision of a part of the gland.

Overenthusiastic followers of the gland cult for awhile claimed that the endocrines entirely determined personality, but these theories have not held under later experiment. It is probably true that in a normal person, glands are related to the degree of activity; but sanity is to appreciate, without fear or favor, the nature of our glandular structure; "That is the kind of a person I am," and then keep the body physically sound. It would seem to be perfectly obvious that no one should use the glandular preparations on the market except on the prescription of a competent physician.

When we ask ourselves what original human nature is, the first answer is that we have certain instincts that manifest themselves in instinctive action. But what is an instinct? There are varied theories as to the nature of instincts, but they all rest on the fact that the nervous system is made up of nerve cells called neurons. The neurons are each a structural unit in contact, but not continuous genetic units; and also functioning as units.

There is a point in each cell where the nervous impulse passes from the axon (center) of one neuron to the dendrites (tendrils or antennae) of another, which point is called the synapse. Continued passage of the same impulse tends to create a pathway which may be the physical basis of habit, or skill. Dr. Edmund Jacobson, neurologist of Chicago University, estimates that there are four hundred billion separate individual cells in the average brain, and that the number of connections between these cells is one, followed by one million ciphers, so that each of us has within our brain the largest number in the world. These pathways are the physical basis of the instincts. There is a cleavage in psychology as to how the instincts originate.

McDougall holds that an instinct is an inherited or innate psychophysical disposition which determines its possessor to perceive and to pay attention to objects of a certain class, to experience an emotional excitement of a particular quality upon perceiving such an object, and to act in regard to it in a particular manner, or at least to experience an impulse to such action. The primary instincts are: instinct of flight and the emotion of fear; instinct of repulsion and the emotion of disgust; instinct of curiosity and the emotion of wonder; instinct of pugnacity and the emotion of anger; instinct of self-abasement, self-assertion, resulting in the emotions of subjection or elation, self-display, parental instinct, and tender emotion. Minor instincts are instincts of reproduction, gregariousness, acquisition, and construction.

In this theory of instincts they are inherited, not acquired. Everyone has all the instincts, but they vary; each is directed toward a certain biological end and some

are latent or dormant at birth but energize and become dynamic at certain ages. On the other hand, the Behavioristic school of psychologists, following Watson, hold that instincts are not inherited responses, not simple innate units of behavior, but a complex and acquired integration of responses through experience and are products of training.

There is today a distinct tendency to view instinctive action as having the nature of a drive. Reduced to its simplest terms the psyche or life manifests itself as a power opposed to its environment. This may be called the "élan vital" of Bergson, the "will to power" of Schopenhauer, the "libido" of the Freudians, or "life" itself.

The individual is looked upon as a living, growing, peculiarly dynamic whole in conflict with an environment which stimulates it, and these life energetic activities are called drives. In his later work, McDougall speaks of instincts as "hormic" (energizing) differentiations of the life force and as the prime movers of all human society. There is no agreement as to the number of these drives. E. S. Conklin groups the drives into three: the drive for power or wholeness, the drive for sexual satisfaction, and the drive for the continuation of comfortable living. The essential characteristics of drives are that they remain as long as life lasts, although they change greatly from time to time. They may be blocked (repressed) but seek new channels, and the biological urge to reproduction remains through life.

In the psychology of Freud there are two fundamental and controlling groups of drives. One group has as its goal self-preservation, such as hunger; the other goal



has race preservation. The energy which drives is called "libido"—toward self-preservation is "nutritive libido," and toward race preservation "sexual libido."

Sex in psychoanalysis includes all those trends that were once sexual, even if they be now diverted to non-sexual aims. All infantile tendencies that are associated with sex in adult life, all various manifestations of parental instinct, everything that ultimately tends to establish such a relation between the sex, as will, insure the continuation of the race.

### CHAPTER III

#### THE PSYCHE DEVELOPS A MENTAL AND MORAL SELFHOOD

THE psyche develops moral and mental selfhood. When one of the instincts is excited, there results an affective reaction which is called an emotion. The physical basis of emotion is the inherited neural mechanism which gives a specific emotional reaction to a definite stimulus. For illustration, the aroused instinct for flight results in an emotion of fear; other stimuli arousing rage and love or sex feeling. These are called primary emotions.

Secondary emotions are those resulting from the amalgamation of the primitive emotions. Out of the seven primary emotions, together with the feelings of pleasure and pain, and perhaps also feelings of excitement and depression, are compounded almost all of the affective states which are popularly recognized as emotions, and for which the common name is "feeling." The modifications, conditionings, and integrations resulting from experience develop the general emotional characteristics of the individual.

When the instincts or drives of the child which are charged with emotion come in touch with environmental conditions or objects, they tend to become attached to, or grouped around these objects, ideas, events, or persons. These combine to form psychological constellations or groups, called sentiments. A sentiment is a psychological constellation acceptable to the individual

and with which he consciously identifies himself. ("I like my teacher." "I hate my teacher.") Patriotism is a sentiment, the nucleus is "the country," around which emotions are constellated. These acquired sentiments are the real units of character. They bring about order, consistency, and stability in the inner life and motivate volition. They determine our permanent interests, they are our permanent interests looked at from the point of view of mental structure, and they contain the possibilities of whatever virtues or vices we may possess. Man, from the earliest days of babyhood, acts and reacts according to the drive of his instincts far more than is commonly supposed. He fondly imagines in maturity that he is guided by reason. As a matter of fact, in ninety cases out of a hundred, he is guided by instinct, and makes up his reason afterward. The task of the parent, teacher, preacher, and pastor is to direct in the formation of these sentiments, transmuting the instinctive self into a moral and spiritual self, thus forming the basis of character and building up soul content. The sentiments are deterministic in that they determine the nature of the individual, and they will inevitably form themselves from random experience or they will be formed under trained leadership, guidance, and discipline.

An emotion perseveres long after the immediate stimulus has disappeared, and it finds opportunity for continued expression by attaching itself to a succession of stimuli, thus giving rise to the phenomena of moods. Once anger is aroused an individual may go about for some time seeking trouble in an ugly mood, "and so the day was utterly ruined." A state of depression

(instinct and emotion of self-assertion obstructed or frustrated) caused by some trivial circumstance, may color an individual's outlook for hours and even days. The mood of an individual actually determines in part the stimuli to which he will react. The mood may cause temporary changes in the endocrine glands, give lethargy, indigestion, nervous fears.

Temperament is our psychophysical disposition. The factors which are responsible for moods may be relatively stable in the life of an organism, and they form certain habitual modes of response, and these constitute the basis of temperament. (The ancients called these the humors of the blood: sanguine, bilious, phlegmatic, and nervous.) There are four views as to determination of temperaments:

1. Temperaments are influences on the nervous system and the mind by the functioning of the bodily organism. There is a background to consciousness (coenesthesia), on which the general feeling tone depends, giving a sense of weakness or power. Muscular development gives a sense of confidence.

2. Temperaments are almost exclusively the product of endocrinal glands. The thyroid gives restlessness, excitability, or dullness, apathy; the adrenal gives energy; the pituitary, masculine or feminine characteristics; the thymus gives the "angel child."

3. Temperaments depend on functional peculiarities of the nervous tissues, such as native differences of excitability, of rapidity of response, and transmission of the nervous impulse, and differences in respect to fatigability and sustaining power of response.

4. Temperaments are determined by the most char-



acteristic moods. They are a continuation of prevailing moods. A tendency to display fear gives a timid temperament, and a tendency to display anger gives an irascible temperament, and a tendency to display love gives an affectionate temperament. Our disposition is composed of all our individual dispositions and temperaments and is the unconscious source of all our spontaneous character. Upon the basis of sentiments and temperament must be built a coherent, integrated personality through teaching, training, and discipline.

A trait is a stimulus response tendency. It is an act of behavior which is manifested habitually and characteristically by a particular individual, or human beings in general. A single trait is one whose varying conditions in men may be measured upon one scale, as the reaction time of sound. Mental traits are not elementary psychological mechanisms, but are groups or characteristic fundamental reactions, based on native constitution and reactions of an individual to his environment.

Examples of traits are: soundness of judgment, tenacity of purpose. The combinations of traits are practically limitless. Suppose a man's nature has five traits, A, B, C, D, E, in five degrees, 1, 2, 3, 4, 5. He would then have 3,125 variations in a single trait, but there are multiple traits, and no trait is manifested twice in exactly the same condition. There may be traits of weakness and traits of power. People are classified into types of personality depending on whether or not they have certain traits.

J. Arthur Thomson says our life is like a prism, it has three sides—doing, feeling, knowing. Each is a doorway to the world of activity, the world of art, religion and

literature, and the world of introspective thinking. Men are of diverse minds, some practical, turning to extreme materialism, men of action; some men of feeling, emotional, extreme in sentimentalism, men of artistic insight, make and reshape the world; men of intellect, to know, not to do.

Jung gives four main functions by means of which their possessor adapts himself to his surrounding: thinking, feeling, intuition, and sensation. They are never equally developed, one dominates the other and we have four types of mental make-ups—the first two, thinking and feeling, are judging types; they weigh and evaluate, they are rational types; the other two are less evolved mentalities, intuition and sensation, and are more elementary. They are irrational or empirical types, not judging, more impulsive, more uncritical.

Jung divided neurotic and normal into two main classes: introverts—introspective, subjective, shut in, who erect defenses against the outer world; extraverts—who go out of themselves, who identify themselves with the outer world. The introvert is the man of inner life and subjective values. His traits are self-consciousness, hypersensibility, moodiness, hesitancy in making decisions, deprecatory as regards abilities, reticent, habits of fits and starts. Introverts are men of principles and systems. They transcend experience by abstract reasoning and purely rational concepts, and care little for facts. Response to stimuli is not action but through thinking about it. (Hamlet.)

The extravert is at home in the world. He has many interests and goes out to meet them, is immediately responsive to a situation, deals with facts as they exist, acts

first and thinks afterward. His feelings are a guide of judgment, he is aware of objects directly. His thought processes follow what senses report, he has feeling for situations; most of his work is done in the unconscious, rarely self-conscious, and he has an impression of assurance and superiority, though not consciously felt.

It is the temperament or type of mind which conditions religious experience. Wealth of emotion and lively imagination, which conceive and express religion in dramatic forms, characterize the introvert. Emotionally stable, mentally alert, constitutionally active, the extraverted man finds expression in moral living and sacrificial service to mankind.

The form of religious experience depends not on the will but on the mental conformation of the individual. One must realize that every person varies at different times in his relation to reality. A sane balance between introversion and extraversion must be maintained if the person is to be normal. One must avoid oversimplification in reducing everyone to a particular type and an easy treatment on basis of classification. No individual is always and wholly of one type, he must be studied as an individual. White asserts that the study in typology discloses the fact that different types are incapable of understanding each other. The classical example is of the introverted and extraverted types. Two such individuals use the same words but what each says is incomprehensible to the other; the whole point of view, the whole orientation of the personality is different in each instance, and if we are to understand individuals, we must most assuredly take account of these differences.

It is difficult to determine what intelligence is. It may be viewed as objective, adaptive behavior, or the intellectual activity responsible for that behavior. It may be measured by the difficulty or complexity of the mental act or by the social values of the act. The basis for the so-called intelligence tests is the fact that mental intelligence increases steadily from birth to twenty years of age, and there is a set of different tests for different age levels. The Standard Binet-Simon scale, revised by Stanford, is that the mental age divided by the chronological age gives the Intellectual Quotient as:

0-69.....	Feeble-minded
70-79.....	Border line
80-89.....	Backward
90-109.....	Normal
110-119.....	Bright
120-129.....	Very bright
130-140.....	Superior
140.....	Genius

Moron's grade, I. Q. 50-70, is recognized fairly easily. They have the intellectual capacity of children, 8-12 years, are limited in powers of adjustment but can succeed under favorable circumstances, social and economic. Failures are frequent but 90 per cent are peaceful, law-abiding citizens.

Feeble-mindedness, I. Q. 30-50, slight mental defectiveness, capable of much improvement by educational methods. Afflicted individual may ultimately take place in the world and be self-supporting under favorable conditions.

Moral imbecility is a condition of mental deficiency which is shown predominantly in the absence of the



highest functions, particularly the moral sense. They are capable of being trained to a considerable degree but are always a menace to society.

Imbeciles, I. Q. 20-40, are capable of being trained but cannot take a place in the world. They are a total loss and must be provided for. They are recognized by symptoms of retardation. There may or may not be stigmata.

Idiots, I. Q. 0-20, are the lowest grades. They are practically always caused by defective brain structure which is hereditary, feeble-mindedness, or may originate intrauterine at birth, or after birth, as result of disease. There are twenty-four different forms of idiocy caused by hereditary defect, accidents, and injuries.

Intelligence tests show largely intellectual development. They should also measure the degree of harmony attained by the instinctive and emotional tendencies. One may be intellectually well developed while the instinctive and emotional tendencies are relatively loosely knit together, the self easily divided, the power of decision lacking, and true volitional strength absent.

To remedy this defect and make tests more real, Professor Thurstone, of Chicago University, in his *Vectors of the Mind*, has isolated eight dimensions of intellect, or primary mental abilities. These are number facility, word fluency, visualizing, memory, perceptual speed, induction, verbal reasoning, and deduction. The individual is no longer marked by a simple I. Q., but by a correlation of these factors. High character may be attained by the individual where intellect is relatively simple and ordinary, but the better organized and richer the intel-

lect, the more effectively will the goals be reached and the life enriched.

What is the human will and what power has it in determining or directing our lives? One of the earliest psychologists, Wilhelm Wundt, defined will as a decision or choice among motives resulting in a change in the direction of life, brought about by the power or ability to carry out the choice or decision into conduct. He conceived will as the capacity of the self to canalize its energy along the line of its decisions. McDougall described the power of the will as due to the development of the sentiment of self-regard. With him the master sentiment for volition is the sentiment of self-control. For the man in whom this sentiment has become strong, the desire for realizing his idea of self-control is a master motive that enables him to apply his adopted principles of action, the result of his deliberate decisions, in spite of the opposition to it and all other motives.

Will, conceived psychologically, is the capacity of the self to canalize its impulsive energy along the line of its decisions, and these decisions are made in relation to an end, self-imposed and self-accepted. Such an end, when stated, gives unity to all the instinctive and acquired impulses. The will is not an arbitrary authority which sits aloft and issues commands for the self to obey; it is a function of the self just as digestion is a function of the stomach, but it is a function that is vital to the self, for without the will the self would cease to be. It is only in so far as the will functions that the self maintains its cohesion and existence. Like all organisms, the self is bound together only by a common purpose and activity.

As soon as a man ceases to exercise his will the self begins to disintegrate and fall to pieces.

The adequate stimulus of the will, which arouses the self into activity, is the ideal, the idea or object which leads to a complete realization of the whole individual. If any idea is presented to the self which appears to contribute to its fulfillment and happiness, then the self is stimulated by it and the will moves toward it. In the absence of such an ideal our actions are left to the mercy of our impulses. If such an ideal is present, the will is aroused and dominates conduct; if it is absent, the will is in abeyance, and the impulses determine activity.

From a literary point of view, Professor Babbitt, of Harvard, insists that we must defend the freedom of the will as a fact of experience so primary that to deny freedom involves an evasion of one of the primary facts of experience, and declares that the Realists and Fatalists in current literature, with their atmosphere of futility and frustration, the tragedies of "rearranging chemism," of Dreiser, Anderson, Sinclair Lewis, and Mencken, do not rise above the level of animal behavior. Edwin Grant Conklin, professor of biology at Princeton, has said that the functioning of the will is self-determined. To charge defects at once to heredity removes them from any possible control, helps to make men irresponsible, excuses them from making the best of their endowments. To hold that everything has been predetermined, that nothing is self-determined, that all our traits and acts are fixed beyond the possibility of change is an enervating philosophy and is not good science, for it does not accord with the evidence, asserts Doctor Conklin.

A practicing psychiatrist, Karl Menninger, states that there are some who fail in life adjustment. The defect is not perceptual, not intellectual, not emotional, but in the resolution of these functions into action; it is volitional. Let the neopsychologists rail at it as they will. It is easy to recognize pictures of a weak will considering will, not as a discrete function of the mind, but as the resolution of the perceptual, cognitive, emotional process.

Are we free to choose? There are hundreds of situations or ideas presented to the mind every day, and out of these the self "chooses" those which will be most serviceable for its own purpose. The "choice" is the judgment after deliberation as to which idea or line of conduct will be most conducive to our purpose or ideal of life. Choice is thus concerned with a means to an end which is an activity of the intellect. "Choice" is, then, primarily an activity of the intellect, reason, and judgment. Our judgment decides which of the ideas will provide us with the means for fulfilling our craving or drive for completeness, our ultimate end. Our deliberation and judgment as to the best means to that end gives us the sense of freedom. The will is free to seek its completeness and is able to move toward the idea or course of conduct by which it may achieve it, but it is determined by the ideal and by the drive for self-realization. If the will is not aroused and stimulated by such an idea, it falls a victim to the dominance of the impulse of the moment.

Apart altogether from the freedom of choice, there is a sense of freedom enjoyed by the self when, by the release of all its complexes, it is freed from all its con-



flicts. When the self is free, the will is free; freedom of the will is freedom of the self. But such freedom can be obtained only by the abolition of all conflict and hostility in the individual, and the formation of a complete harmony of all impulses. The completely harmonized self is the completely free self. The freedom of the will is only progressively secured by the pursuit of an ideal capable of organizing all the instincts and leading to greater self-realization. This is the element of truth in the Augustinian paradox that we are only free if we choose the good.

When the self chooses rightly, that is to say, when it chooses what actually does make for the happiness and completeness of the self, it enlarges the freedom and scope of the self, and by so doing necessarily gives greater power to the will. So the freedom of the will is not static, but dynamic and progressive; it is dependent on the progressive attainment of this larger unity.

The development of the functional activity of the will may be made in many different directions.

1. To turn attention away from an overdeveloped motive element decreases its vital force and its grip on the whole personality. Just as a limited or deficient supply of blood leads to atrophy, so lack of attention leads to atrophy of desire and weakens, or inhibits it.

2. To bring in thoughts which supply motives which override the lower motives, as in "The Everlasting Mercy," by Masfield.

3. Action of will in volition produces an effect on the entire self. Physically it digs a channel; mentally it produces a tendency and this results in habits, a second nature. Habits are the secondary effects of volition.

They may be deliberately shaped, restrained, and encouraged by the will. A motive once chosen becomes more powerful as an incentive, and is more easily put into action. A motive when habitually chosen becomes an automatic will and establishes the basis of character.

4. When a choice has been made among motives, the will canalizes the energy along the line of that choice. Dead people name "executors" of their will, but a living person must be the executor of his own will. Failure to execute dissipates the power of volition. A decision means nothing in life until it is put into effect. Having made the decision, the self must not be allowed to be deflected from it.

5. Carrying a decision into action builds up the sentiment of self-control. James says, "Keep the faculty of effort alive in you by a little gratuitous exercise each day. That is, be systematically heroic in little unnecessary points, do every day or two something for no other reason than that you would rather not do it, so that when the hour of dire necessity comes, it may find you not unnerved and untrained to stand the test. Daily inure yourself to habits of concentrated attention, energetic volition, and self-denial in unnecessary things." This gives a consciousness of power. When failing in action one says, "I know that was weak of me," while athletes keep on edge, and fighters build up morale until they say, "I know I can do it."

How does the psyche become moral? If we analyze the workings of conscience, we find the three characteristics of all mental processes; cognition (knowing), affect (feeling), and conation (action).

1. Once the child is capable of dealing with and ac-

cepting moral standards, there is a spontaneous passing of moral judgment on the actions of others and of his own. Intelligence when it works in the moral sphere is as sure in its working as in any other sphere. We perceive moral situations within the range of our moral intelligence in the same sense and with the same degree of certainty that we perceive ordinary situations of sense experience. The recognition of a moral situation is spontaneous; we pass moral judgments as immediately as we pass judgments within the realm of our ordinary sense experience. The standards by which a man judges will be determined by his education, social group, and his own ideals.

2. As rational processes become more dominant, the standards themselves will come under rational scrutiny, and upon reflection we will decide upon a standard or ideal. The mind attempts to co-ordinate or regulate its behavior according to these standards, consciously or unconsciously, accepted by the self. When the mind attains to self-consciousness, ethical conflict arises, and as conscious beings, we begin to direct our behavior, even our instinctive behavior, by voluntary purposes; we are no longer subject to the urge from behind alone, but also by ideal ends; we are determined not so much by the act we performed last as by the act we hope to perform next. Especially is this true when dominated by conscious ends.

3. Once we have established standards and accepted them there is an impulse to obey these judgments. Intelligence canalizes itself along the line of moral experience as well as along other lines. The authority of conscience in a psychological sense is that it legislates

for the personality as a whole. Conscience will not tolerate behavior which contradicts its accepted standards any more than does reason. It is a dynamic activity of the mind. This impulse toward our accepted good conflicts with any other impulses contrary to our standards.

4. Accompanying our judgments are specific feelings peculiar to conscience. These are approval or disapproval. The emotions arising from a disobeyed conscience are among the most painful we can experience. We experience relief when we have passed through some strong temptation without sin. The man whose conscience compels him to do the unpopular thing is sustained by the specific feeling of rightness, the feeling, "I can do no other, so help me God." The feeling may deepen until it reaches the sublime height of Kant's reverence for the moral law. These seem to be specific emotions which cannot be resolved into compounds of other emotions arising from instincts or drives.

Even Freud held to a "super ego" which is the unconscious criterion of right and wrong—that is, the "censor" which is responsible for repression. With Freud, "the ego ideal" is that contribution to the conscious "conscience" that comes from unconscious influence. Nicole, in his *Psychopathology*, says he fails to discover the source from which Freud gets his "super ego."

5. The conscience has an end ideal. The psychoanalyst has as his ideal the restoration of the individual to his self-control, regardless of what moral ideals may be. The physician has a standard, the health of the individual. Psychotherapy has the ideal of creating or restoring individuals to normal health, physical and



mental. The end of conscience is to bring our instinctive nature into obedience to our rational and moral ideals. Human nature, as such, is neither depraved nor sinful; a sinful nature is not transmitted; hereditary sin is a contradiction in terms. Sin is acquired. Instincts are not sinful; it is the desire to enjoy their pleasure, irrespective of the effects on our character or on the lives of others or of obligation to God, which is sinful. The work of conscience is to direct the energy of the instincts so that it can become the motive power to be used for the larger purposes of the self.

The meaning of the "self":

1. The self concept is the idea of the self which the individual has discovered for himself; that is, "I," "Me," "I want." It is a concept which grows out of sensory, perceptive, and intellectual experience, just as have all other concepts. It is in the same class as an individual's concept of a house or a tree.

2. The "self" which other people recognize him to be. James says that a man's self in the broadest interpretation includes all that he may call his; indeed, noblemen and Scottish farmers often call themselves by the name of their property. In another sense, a man has as many selves as there are people who recognize him; he is one self to his wife, another to his children, another to his business partner, another to his God.

3. There is a "self," however, which we normally recognize, and which we may call the accepted or "organized" self—the self that is "up" for all practical purposes. As the instincts are organized around some accepted idea or person to form sentiments, so the sentiments are in turn organized around some ideal to form this self. The

"organized self" may be defined as the organization of all the accepted sentiments and dispositions.

This "self" consists of all the sentiments for home, family, and country, of the love of beauty, the love of the good, the love of the true, and such dispositions as sincerity, a tolerant and courageous spirit; or, on the other hand, the "self" may consist of sentiments and dispositions of cruelty, licentiousness, avarice, and cowardice. It is this combination of constellations which we normally call "ourselves." We might call it the "accepted self," for it consists of all those thoughts and feelings, desires and aims which we accept as ours, and with which we identify ourselves as "I." "I" consists of all that I accept in myself; this is my "real self." But, it may be asked, if the "self" is an organization of all the sentiments and dispositions, what binds them together? What is the unifying principle which organizes it? It is that they are directed toward a common purpose. We call it the "organized self," because it is that part of our whole individual which, on account of having common interests and a common purpose, is organized into a whole. It is one because it functions as one.

4. In psychoanalysis the self means the sum total of all in an individual that is conscious or foreconscious or unconscious.

5. The self in a metaphysical sense: behind all psychological processes there must be an "ego," a unifying principle, which takes all our sentiments and binds them together; the term "self" is used of this ultimate ego, this unifying principle which continues through the changes of the body, beneath the fleeting flow of the momentary

change as an abiding and unique reality. Carrel calls it a "wraith" that perseveres.

What is personality? Few words have changed their meaning so often and so violently as "persons" and "personality." In the early Greek drama the actors wore masks, and when the Romans adopted the mask, it was called *persona*, and meant both the mask and the actor, *dramatis persona*. Then it was suddenly shifted to mean the man behind the mask.

The definition of personality begins in the simplest stage of biology. Biologically a person is a zoological human individual with capacity to assimilate from his environment. A step higher, and what constitutes a person is a conscious separate existence, as an intellectual and voluntary being. A general definition of personality is that it is the totality of all physical and mental characteristics, traits, and temperaments, and their interrelations. It is all that characterizes, constitutes, and distinguishes a human being.

There may be all degrees of development of the personality. It may be blighted, dwarfed, unbalanced, or there may be an unfolded personality in which there is breadth, balance, and unity. The self may reach its greatest and best in a personality which has a fully developed intellect, receptive temperament, and noble character, and may even have that inner beauty which gives the soul an aesthetic and spiritual appeal.

In the end the psyche returns to religion. In the early Christian writing, the "person" was divided into: body, the psyche (known as mind), and the pneuma, which was the spirit or soul. As a last step in the genesis of the soul there is a sort of an apotheosis (making divine)

of the psyche as it becomes the means by which human life enters into relation with the life of spirit. Dr. Cosmo Gordon Lang, Archbishop of Canterbury, declares, "We must recover the Soul, and by the Soul I mean that vast body of memories and forces which lie below the level of consciousness, where the conscience speaks and where a man becomes conscious of God." The soul then becomes the instrument by which the "organism as a whole" relates itself to the personalities, powers, and processes which we call spiritual.

Here we must pass from the sphere of the academic psychologist, who can only study religious concepts as "behavior" without relation to the ultimate validity of objectivity of those concepts, to the sphere of the practical religious psychologist. As this is a purely practical work, certain conclusions from theology and philosophy must be assumed as proven in order to give a firm background and basis for spiritual life.

The possibility of the utilization of the life and power of God in the direction, development, and recreation of human life into the likeness of Jesus Christ is laid in certain fundamental assertions. There is a conviction of the objective existence of a Personal Being in whom are to be found all the values of the true, the good, and the beautiful, and who enters into relation with the lives of men. There is a realization that the Spirit of God is the ensphering atmosphere of the soul through whom the power of God is ever present and made available; and the assertion that the Christian way of life is the best life lived, at its fullest dimensions, and directed toward its most useful and highest destiny of the individual and humanity as a whole. Join with this a recognition of



Jesus Christ as the revelation of the outgoing love and cosmic purpose of God and becoming thus the temporal and eternal Redeemer of human life, both individually and as a whole, in the kingdom of God. This groundwork must be not merely the conclusion of a philosophical or theological argument, but must become the integrating purpose and the ruling passion of one who would absorb and assimilate the life-giving energy of God in Christ in developing, preserving, and restoring physical, mental, and spiritual health, and in creating ideal social relations set forth by the Master as the kingdom of God.

Every soul has before him the problem of finding a satisfactory adjustment to the material and spiritual worlds around him, and will need all that both science and religion can teach him concerning human life and its relation to the Divine that the insights from both the fields may aid him in the development of the human-divine nature in man.

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BOOK II  
NORMAL ADJUSTMENT



## INTRODUCTORY

RECENTLY a man went in to have an oculist examine his eyes. After the examination the oculist reported, "You have normal eyesight"; and then added, "Only one person in ten has normal eyesight." Before we begin the study of adjustment we must try to establish a norm, or standard, for the individual—what the person should be at that time of life, sex, social position, etc.

The physician begins his diagnosis by making certain almost routine tests: Blood count, blood pressure, urinalysis, Wassermann, and Schick tests. He has in mind the mental picture of a perfect physical specimen with which he can compare or contrast the results of the tests of this individual. So the soul physician must have some norm if he is to follow normal adjustment. Unfortunately, there is no exact agreement as to a normal personality.

According to the normative view, the normal is regarded as the ideal function or the best possible adaptation. This is a view frequently held by physicians, but it is not an accurate or workable view, for it contains a subjective factor, namely, opinions or ideals which differ from person to person. Thus it would be impossible to give a definition of "best possible adaptation" that would be generally accepted.

According to the statistical view, the normal is merely the central tendency of a group, or what is usually called the average. This is an objective and quantitative conception. From this point of view the normal can be definitely determined in the case of all measurable traits or functions, and in the case of nonmeasurable traits it

can be determined in principle if not in fact. The statistical view is therefore the one most commonly adopted for scientific purposes.

Morgan, in his *The Psychology of Abnormal People*, gives three definitions of the normal: the normal is the authoritative standard of physical and mental health; one is normal who has no unusual condition serious enough to be considered morbid; and the normal person statistically is the one who is near the central tendency of the group of individuals. There may be all degrees of abnormality.

E. S. Conklin, in his *Principles of Abnormal Psychology*, after devoting thirty pages to defining the physical, mental, emotional, and religious elements which would create a normal life, concludes by saying that a life meeting all these requirements probably never existed. The fact is that psychology, psychiatry, and sociology have given us broader views of behavior and erased the sharp line between the normal and the abnormal.

The old Quaker's observation, "Janet, I think all the world is a little queer but thee and me, and sometimes I think thee art a little queer," has been given scientific standing by the work of Karl Menninger, in *The Human Mind*, who states that the mind is a collection of enormous complex possibilities for variation; most of these variations being called abnormal by people with some other kind of variation.

This view of the abnormal has a number of important implications. In the first place, the abnormal includes the supernormal as well as the subnormal, since the deviations may be above as well as below the central tendency.



Secondly, the abnormal must not be confused with the pathological or morbid. The abnormal includes the pathological, but there are many abnormalities that can in no sense be regarded as pathological. These are merely idiosyncrasies, or marked individual differences, and represent constitutional factors of a nonpathological nature. Thirdly, the abnormal must not be identified with the undesirable. Some abnormalities may be highly desirable, others may be undesirable. For instance, genius is usually regarded as desirable, as is also exceptionally good memory, or keen sensory discrimination; whereas stupidity or marked forgetfulness are usually regarded as undesirable. Normality is mediocre. Genius is abnormal. Those who achieve greatly are different from the common run of people.

What is adjustment? The human being in early life is impelled by instincts and drives. Later these become motives, such as sentiments of self-control, mastery, or desire for social approval, and these impelling forces finally emerge as goals or ideals. By his very nature, man is driven to satisfy these demands of his life, and thus reduce the strength of the drives. Strong motives when aroused keep the individual in a state of activity, searching for some solution or way of life which will end the activity of the emotion in a satisfactory way. When that way is found it is called the adjustment. When, however, the person meets thwarting in the form of material obstacles, or from competition, or due to his own lack of ability or training, the result is termed frustration.

Normal adjustment is, then, the finding of a way of life in which all the drives and demands of the person are so adjusted to the whole of reality that a completely

developed, unified, and harmonized personality is achieved. The ideal of the religious life is to develop the instinctive, unorganized, self-centered infant into a physical, mental, and spiritual adult adjusted to the supreme spiritual Reality whom we call God. For Christians the ideal is the measure of the stature of the fullness of manhood as revealed in Jesus Christ, with supreme loyalty to Jesus Christ and the kingdom of God.

## CHAPTER I

### THE INFANT

**C**HILD study has become important, not only as an aid in the wiser handling of children, but as an indispensable aid in the understanding of adult thought. In the infant we see the emergence of the instincts in their pure form, uncontaminated by experience and discipline, and careful observation will enable us to detect the first simple rudiments of all the higher operations of reason, and thereby get a clearer idea of their essential nature.

The study of the infant and young child has assumed great importance because of the realization that at a very early age the attitude toward life begins to be formed. According to Wexberg, the first conscious attitude of the young child toward its environment, its earliest feeling when the reactions cease to be purely reflex and begin to gather into a sense of identity, must be one of helplessness, and the way in which it adjusts itself to the situation will determine the whole future bent of its character. The individual must assert his own identity; he must either rise superior to his environment by fair measures or foul, or take refuge from the real world or in one of his own making. Fritz Kunkel has very finely elaborated this position in his later works.

The first movement toward individuality is in the formation of sentiments. At birth the infant has certain instinctive tendencies or drives. These tendencies are aroused by certain objects in his environment and conse-

quent emotions of various kinds are aroused. Gradually he begins to like some of the objects and to dislike others. He struggles to obtain certain objects and to avoid others; he has begun to form sentiments of a rudimentary kind.

There are two classes of sentiments: attraction toward and repulsion from. The first is associated with pleasantly toned emotions, the second with unpleasantly toned. Toward the first he will develop the love sentiments, and objects which are unpleasantly toned he will avoid, and thus a hate sentiment is formed. Each sentiment is gradually built up according to the experience of the individual. When emotion is repeatedly excited by a particular person or object, that person becomes a substitute stimulus for emotion, and his presence, his possessions, or the thought of him may call forth emotion or emotionally motivated behavior. If a child is frequently thrown into contact with a person who shouts at him, or pushes him, or physically restrains him, this person becomes a fear stimulus. If this person restrains him, a rage reaction also is developed. A child's attitude is a mingling of fear and rage or a sentiment of hate. The sentiments thus formed are reproach, jealousy, shame, joy, sorrow, admiration, parental and filial sentiments, awe, and reverence.

The child goes through three stages. In the first he forms sentiments around inanimate objects. Objects have no will to oppose him. These are very strong and while dominant are very determining. For illustration, a teddy bear or a rag doll. In the second he forms sentiments around animate as well as inanimate objects. In earliest years their power is slight and not nearly so im-



portant to the child as parents imagine. In the third stage the child forms abstract conceptions, such as goodness and honesty.

Two factors influence the formation of sentiments. One is aptitudes or innate ability to learn, and temperament—in extravert and introvert types, as boys who love football and those who love reading. The other is environment, especially that furnished by parents and teachers; if he has a sentiment of love, they will have great influence. But the infant will have a sentiment of love for parents only if they have deserved that love. The infant is extremely suggestible and consequently has no individual thinking, but only imitation, both for the words and deeds of others.

What is the average development of the normal child? From birth to the first month the baby will turn his head when lying on his face and will try to grasp at an object held near his face. At one month the baby makes crawling movements when laid on his stomach; lifts his head unsteadily when in this position. At two months he holds head erect for a short time when held to the shoulder; makes upward arm thrusts when lying on his back. At three months he holds head erect and steady when held to the shoulder; pushes or raises self by the arms when lying on the stomach. At four months he smiles; holds head steady when carried; lifts his head and shoulders when lying on his back, as an effort toward sitting. Hands are no longer mostly clenched, but frequently open. Notices large objects. At five months he rolls from his back to his stomach; sits up with only a slight prop. At six months he laughs frequently; expresses recognition of familiar persons; sits momentarily

without support, if placed in a favorable leaning position; uses hands to reach, grasp, crumble, bang, and splash. At eight months he sits momentarily without support; raises self to sitting position; begins to use the fingers in grasping. At ten months he may creep or hitch; pulls self up to standing position; uses finger and thumb in grasping; says "dada or mama," or equivalent; may know a trick or two, like peek-a-boo. At twelve months he shows preference for one hand in reaching; walks with help; can wave "by-by" and often can say it; holds cup to drink out of; co-operates while being dressed (thrusts arm into sleeve, for example). At fifteen months he stands alone; walks alone. At eighteen months he points to eye, nose, or hair; climbs stairs or chair; bowel control practically established; tries to put on shoes. At twenty-four months the little boy can operate kiddy car around chair; piles tower of six blocks; names familiar objects, like key, penny, watch; bladder control established. At thirty months he goes up and down stairs alone; tries to stand on one foot; walks upon two parallel 4x4x4 inch beams, six feet long, placed eight inches apart, without stepping off. At thirty-six months the small child draws a circle from copy; can tell simple stories; walks up steps without support; puts on shoes.

Some parents believe that the child's training should not be begun until he is old enough to understand. This is a mistake. If the youngster is to develop a strong, stalwart body and is later to take his place in society as a useful and desirable member, the teaching of good habits should be commenced in infancy. First of all, regular periods of feeding, sleeping, bathing, etc., must be established. Many a mother will find difficulty in

resisting the temptation to rock the baby—in fact, to do anything to stop its crying, as she may be exceedingly sensitive to her infant's wails. Crying does not hurt a baby if he is not ill and if food—adequate in amount and quality—has been given at the regular period. A baby is like a young animal. He loves to be picked up, played with, and petted. After a while he will expect this procedure. If the youngster is taken from the crib every time he cries, instinctively the habit will form and the parents will lose hundreds of hours of needed rest.

If the baby is fed and put to bed at the same time every day, he will learn to expect or even anticipate the procedure. Everything possible should be done to avoid breaking the routine. Often a child will object to going to bed. This is usually because interruptions in the regular routine have occurred, each of which the youngster remembers.

Many a child, in order to gain attention, will do almost anything, such as dropping or throwing playthings or various eating utensils. Scolding or creating a scene is just what he wants—not that he understands it all, but he gains his point. Babies comprehend more than most of us realize. They respond readily to the soft spoken voice and to smiles of approval. We can ignore naughtiness, but train the child to expect commendation when he is well behaved. He will quickly learn the difference. By all means every family expecting or having infants should obtain the publications of the Children's Bureau of the government at Washington.

During the time of real infancy the child must be awakened to those feelings and emotions which form the basis of the later religious life by a process of induc-

tion. A strong electric current will produce by induction a secondary current in uncharged wires or pipes by its mere proximity. Similarly, feelings of awe, respect, and reverence may be caught from their elders by merely being in the presence of parents who have a religious life. Children learn by imitation, and every mother should know that her every action becomes a lesson to the watching, listening, eager child. She must be what she would have the child become in attitudes, manners, and conduct. The awakened feelings of attachment to and respect for certain things must be early directed toward certain religious objects or ideas. The wonder and love of very early childhood may be clustered around "God's house," "Heavenly Father," and the "little Jesus." A certain four-year-old remarked about her church-school teacher, "She must be Jesus' grandmother, she talked about him so much."

A baby hears before he understands, and to sing lullabies, not only of "treetops," but of a Father's love, will awaken a deep reverence. Your prayer over the baby's crib will be heard and even though not understood will induce a peaceful trust. Here is the very seed of the religious life, for unless there is this feeling of awe and reverence toward religious objects and ideas, there will be nothing to which formal religion can appeal, and though later the parent or family may, through authority, compel formal or conventional respect, it will be without any deep-seated sentiment. To thoroughly appreciate this fact, contrast Theodore Dreiser's *Autobiography* with Lee's *Life of John Wesley*.

A child early acquires the use of words. A visitor in a home remarked, "Your boy must know over fifty



words." At which, the mother indignantly produced a list of two hundred and fifty-three words which the twenty-one-months-old boy used with understanding and discrimination. While the child is acquiring his vocabulary he should be given words of moral meaning, such as good, bad, right, and wrong, and some simple concept of God that is appropriate to the child world. Then experience must be so directed as to enable the child to fix in his mind these words as representing reality.

Through examples, stories, and problems of conduct, there must be aroused the emotions of wonder, tenderness, and love toward the objects or realities concerning which he has received instruction. The child should be taught to live the kind of a life which is best suited to the particular form of religion in which he will presumably live.

## CHAPTER II

### CHILDHOOD

**I**N every child there is a potential for physical maturity and likewise for emotional or psychic adulthood. The development of childhood is to discover the nature of these potentials and so condition them that they may reasonably be expected to be brought into full flowering.

Physically, the child is a sensori-motor apparatus, a living mechanism that is stimulated and that will automatically respond. The first need is that children must have a free and uninstructed chance to come into contact with environment. This means motion in crawling, then exercise in walking, and then free hours of play. Some psychologists insist that after five or six years three hours a day are needed to develop nerve and muscular adjustment. The number of treatises written by authorities in child study is so great that detailed physical development may be a matter to be referred to texts.

Mentally, Piaget distinguishes two levels in the child mind between six and seven years. The child is ego-centric, autistic, and obedient only to its own pleasures and wants; it is the level of desires, whims, and of subjectivity. The upper plane is one of objectivity; speech, logical ideas, the plane of reality. This is built up little by little by social environment. If an observer looked down on the mental processes of the child without noticing these two different planes and supposed the activity to take place on one plane, he would get the impression of extreme confusion. Each of these planes has a logic

of its own. That of the child is autistic thinking, that of the adult, logical thought processes. The perspective given by this genetic point of view greatly facilitates the interpretation of the child's mental activity.

Piaget's study indicates also that the effort to understand other people and communicate one's thought objectively does not appear in children before the age of seven or seven and one half. They understand acted conversation, games, occupations, and the general activities of life, not merely in spoken conversation. When young children forget, they fill in the gaps by inventing in good faith. "It is because he is egocentric and feels no desire either to communicate with others or to understand them that the child is able to invent as the spirit moves him and to make so light of the objectivity of his utterances."

To understand the child's mind we must enter into the world of imagination in which the child lives. The child lives in a larger world of wonder and delight than he can compress or whittle down into words. A child is told stories of elves and fairies and then when he makes up such stories, we call it "lying," when in reality it is, in embryo, the most precious mental power of his mind, the creative imagination.

Bannister, after a long experience with children, says that the child is often more intelligent at the age of five or six than he will be ten years later and frequently far more intelligent than his parents, and has considerable logical ability. When one considers the incredible amount of objective material which must be assimilated by the child in the matters of language, habits, customs, and social surroundings, the statement of Bannister as

to the free spontaneous mental activity of the child does not seem so remarkable.

The bulk of education of children is in answering questions. There should be no relaxation of the duty of parents to give the best information at their command and reply honestly and persistently to the curiosity of the child. Kipling says, "I have five faithful friends who have taught me all I know; they are Why and What and When and Where and Who." There ought to be an atmosphere in the home which makes it possible to ask natural questions about sex almost as easily as about other things. The neuroses of child life contain more ignorance, misinformation, and bad habit formation about sex dating back to childhood than any other ingredient.

Training the budding faculty of the imagination must begin here. Phantasy in a child may be creative, inspiratory, or compensatory, and the latter especially leads to romancing, in which the child, although he deals with an untruth, is not telling a lie. A little girl with this romancing tendency came home to her preacher father telling him, "Papa, I saw a white elephant coming down the street." And in an attempt to show her the fault, he said, "Why, Dorothy, I saw ten white elephants coming down the street." To which she countered, "Papa, is that true, or are you just preaching?" The child can be taught gradually, skillfully, tactfully to report facts as they are and become reliably truthful.

The infant has certain characteristics which are carried over later into childhood. The child is fundamentally concerned with itself; it is selfish, in that it involves an individual aim. The child has an instinctive



craving for power and for recognition from others. Thwarting the child's self-assertiveness is frequently provocative of symptoms; too much recognition results in being selfish and spoiled. This first period of life is a time of boundless self-love. The child is absolutely egoistical and loves only those who do his will. His phantasy steals enormous riches for him and creates infinite possibilities in which he is always the hero. This overestimate of the ego is increased without measure by the blind adoration of parents. The child hears a thousand times how "beautiful," how "dear," how "sweet," how "charming," how "entrancing" he is. During the next period, that from seven or eight to puberty, in the child's questions, social development is begun, and this little by little modifies the child's subjective egocentric thinking to objective and later to logical thinking. Other social relations develop; but while egocentric thinking is checked, the ego still asserts itself in relation to others.

The world of the child rapidly expands and integrates into a whole with which the child is often at odds. The child is becoming an individual with a world centering in itself, but, unfortunately for the child's continued happiness, the world does not conform to its desires. Training is the organization of these instinctive impulses into some pattern of habitual action influenced by environmental experience of a restricted and protected kind in early childhood. It is here perhaps that elements of our common social inheritance are laid down, especially as a result of commands, orders, and disciplinary maneuvers of various kinds. The source of authority and the origin of control are parental, or representative

of that source—nurse, elder brother, or sister. The taboos, customs, conventions, fears, superstitions, and all the rest of our social plunder are handed out and accepted, some painfully, it should be admitted, some without question.

The chief social mechanism is the slowly developing faculty of speech, by which the child is brought into relation with his environment, other than by physical contact. The social inhibitions are no longer put into force by physical means alone, but by the use of words, phrases, and commands. The child not only learns to talk but is also instructed what not to say, or often to say it in some other way. In this simple fashion the repression faculty is given opportunity to develop and the devious uses of speech to hide meaning and to distract attention are duly exercised. Control may be defined as that impulse or that tendency to obstruct or alter a piece of conduct which for the time being seems to be logical, natural, instinctive, or pressing. The mechanism of obstruction derives its energy from social demands on the one hand and from personal considerations on the other.

In a primitive sense, control has in view the safeguarding of the individual, either as one of a group unit or as a free individual, compelling in either instance a type of conduct in conformity with the usage of the group or preventing a destructive or dangerous reaction in the face of the unexpected, surprising, or startling. The resulting conduct then may be said to be adapted to the situation, all things being considered. Adaptation and repression are thus seen to be of one piece and are both of them perhaps the most important psychological

mechanism with which the developing child is furnished. They arise from very simple beginnings, such as commands in infancy, training schemes of one kind and another, habit formulations, and all the various types of instruction to which a small being, from infancy up, is exposed.

The most important psychological fact in the life of an individual is the birth and development of self-consciousness. There is probably a birth of self-consciousness at the age of three or four when the self is so organized that it can look back on itself. When consciousness is developed to the point of a distinct self-conscious individuation, the individual can appreciate the nature and quality of his acts, he can know and feel the difference between right and wrong. He becomes self-conscious with a feeling of shame or pride in his actions. "Big boy," good boy," this individuation takes place in all the realms of life. He becomes a rational being, he can "see" the reason and meaning of things, and he finds himself obliged to protect the integrity of his own ego.

When self is organized so that it can act as a whole, "will" is developed; he has a "self-will," which means the demand of all his instincts, especially self-assertion, for satisfaction. This power of will brings with it responsibility to act according to his reason or conscience in matters of morality and so it accepts or rejects actions according to their moral values. This is the age when, on the basis of the sentiments and traits and moods of the growing boy, there must be built the basis of character by direction, discipline, and habit formation. Neg-

lect of habit training and development of self-control and self-reliance are fatal to growth in personality.

Moral training may be negated by punishment. Punishment should never be retribution; it should always aim at replacing a bad habit by a good one, never the working off of the parents' own emotion of annoyance or irritation. It should not be based on value of article broken, if the child does not know value.

One must not punish a child for what is essentially a good quality. If he has a strong will in doing things we like, we praise him for being determined, resolute, game; but the same quality in things we do not like we call obstinate, stubborn, and perverse. The parents must explain the thing he is persisting in and why it is good or bad. Punishment is a two-edged sword. If consistent, it may be quite all right, but to punish for a given act one day and applaud it the next—just because it is cute—is unwise. It goes without saying that physical punishment of babies is inconsistent with the proper development of the nervous system.

In giving commands which demand instant obedience, do not multiply them. In a home a psychologist observed that in two hours a boy was given one hundred and twenty commands, forty-seven "to do," and seventy-three "not to do." The "Johnny-don't" attitude is not good, and, worse, "Find out what Johnny is doing and tell him to stop it."

We must not expect loyalty and love simply because we are parents. We must earn loyalty by winning confidence of children and their love.

Moral training, positively, is building up an emotional control. For normal growth, children must gradually



acquire a certain amount of emotional control, by building up a sentiment for self-control. His self-assertiveness, his desire for recognition, and his curiosity must be all organized together in such a way as to produce a sense of responsibility and further a sense of respect for himself.

Identification is the driving force which makes it imperative for children to imitate first their parents and later those with whom they come into contact. The most potent form and most common is idealization. This tendency puts a glamour on the lives of parents. The parent is the citadel of the child, and it must not be allowed to crash too quickly nor must it be perpetuated too long, or life will become a slavish imitation. The child digests by imitation both good and bad qualities; hence there must be given qualities to imitate which will lead to maturity, honesty, truthfulness, and courage.

Suggestion also plays an important part in child development. It is an impetus toward certain kinds of behavior given by something in the surroundings, through pictures, a hint, or by indirection. Children absorb and react to suggestions very readily. In a city square, in which there are at least four "kids," the type of film at the neighborhood movie can be known by whether the "kids" are playing "cowboys," or "gangsters." Personal suggestion produces personalities; "Betty is so nervous" soon has Betty playing the part of a nervous child. "Bedtime stories" may become suggestive of peace and quiet or a stimulus to hilarity and a roughhouse. To be effective in training, suggestions should build positively and should have a strong element of conviction.

It is the contention of the individual school of psychologists, especially of Wexberg, that the attitude of the child through all later life is set in the years before seven. The child, they say, at that age has developed one of three possible attitudes: an attempt to improve oneself in the world by subterfuge, blustering, exaggerating one's feebleness; a retreat into phantasy and imagination, eventuating in a neurotic personality; or, finally, a courageous recognition of the facts of life and a determination to achieve by honest endeavor. Here is where all education should mean "leading out" the child, through training, into a courageous and brave attitude toward life.

The years of childhood, running into the years of early adolescence, are the time when the seed of the religious life should be very diligently planted deep in the child mind and character. It is at this time that there should be given to the child the thought that spiritual development is as much a part of "growing up" as physical or mental advancement, and, further, that this part of life is as natural as any other development. The father and mother of modernity who say, "Wait until the child grows up and then let him choose for himself in religious matters," are just as logical as those who say, "I do not want the child to be cramped by education; let him grow his own mind." It is to be noted here, however, that by religious training is not meant the acceptance of any definite creed but the establishment of the sentiments of awe, wonder, respect, and obedience, and habits of self-control, self-respect, and a respect for the rights and lives of others.

The key word for this process is information, in its

deepest sense, forming in the emotional, intellectual, and moral life of the growing child permanent sentiments and motives of a high and unselfish personality. The first step is information in the technical sense of giving word instruction, followed by historical or imaginary illustrations which embody the meaning of the words, as in hero stories or actual lives of great men. This information must be followed by example or actual experience in exercising the virtues thus formally taught, so that there is formed in the character of the child habits based on actual doing. Later there may come instruction as to how these habits fit into the scheme of a fully developed personality and also into the plan of an organized society based on the teaching of the Master.

## CHAPTER III

### THE ADOLESCENT

**B**EGINNING at the tenth year and lasting into early adolescence is a period of accelerated growth and development. This is the period of pubescence. In addition to sex development and differentiation, which is the outstanding phenomenon of this growth, a tremendous general physical growth and development take place in the individual. The body and mind of the pubescent and adolescent child are inseparably connected and the physical conditions and growth are intimately involved with the mental processes and reactions. In fact, probably at no other period of life are the psychological reactions of the individual so closely related to and dependent upon the physical changes which are taking place in the body.

It is essential to recognize that the adolescent years are years of tremendous body growth. The human organism at this time is in a state of constant change. In this growth nearly every organ and tissue of the body is involved. The increased growth of the skeleton—the bony framework of the body—makes up a large part of this general growth in height and weight.

In order to maintain itself, the body requires a constant supply of fuel in the form of food. Not only must material be supplied in the food which can be transformed by the body into material for growth and repair, but every action of every cell in the body requires fuel which has its source in the food eaten. Few realize the



tremendous food requirements of the growing boy and girl. First of all, growth, as has been pointed out, is very rapid at this time. Second, the muscular activity of adolescent boys and girls is very great, as everyone knows by observation of their play. Third, in addition, the rate of activity of the body tissues at rest (basal metabolism) has been shown to be twenty-five per cent higher in boys at puberty than the basal metabolism of the adult. These three factors are the cause of the tremendous food requirements of children during this period. In studies made a few years ago, at one of the Eastern preparatory schools, it was found that the boys from thirteen to sixteen years of age took approximately five thousand calories daily in their food and apparently required this amount. This is nearly half again as much as a farmer at his daily work requires. The enormous appetites of children at this time, which never seem satisfied, are not abnormal. The boy or girl in the teens requires at least two hours of play every day. A large amount of this must be in the form of exercise.

As puberty is a development of a function, pubescence does not necessarily coincide with the anatomical or chronological age of the child, and the two are often confused. Some boys reach puberty as early as the eleventh year and others as late as the sixteenth. Some girls begin menstruation at ten and others as late as sixteen or seventeen. It is difficult to determine the exact age of puberty in the male, but in the female the time of beginning menstruation is regarded as denoting this period.

Beginning at about the tenth year, and more or less paralleling the changes in general development which have been described, the organs which have to do with

sex functions show a rapid growth and development and sex becomes more sharply differentiated. The most pressing physical problem of adolescence is to control and direct the biological urge to reproduction in a wholesome and normal way. The course of development as seen by psychologists is about as follows:

The first phase is attachment to the mother; she is the source of comfort and help, and the mother love is the instinctive dominant drive.

With the boy the second phase is one of attachment to the father, and this is primarily characterized by aspirations after independence and a readiness to take responsibility. The attitude of seeking or counting upon protection wanes, and chivalry begins to manifest itself in early offers of protection to younger or weaker children. The boy is at this point more a nuisance to society than he is likely to be again. If paternal authority be constantly evoked to insure less antisocial conduct, the boy tends to regard authority (as vested in the father) in the light of an insurmountable barrier to achievement.

In the third phase of the boy's development his dominant emotional interest is with other boys; firstly, the heroes of his school environment, who partake to some extent of the nature of father-substitutes, and from whom he may derive an incentive to develop and progress. In this phase it is normal for the boy to express a marked detachment from the other sex. This phase may be expected to last from fourteen to eighteen, though it is to be remembered that these figures are subject to very notable variations.

At about eighteen the boy should enter upon the final or mating phase, the phase in which normal romance

and passion should lead to courtship, marriage, and parenthood.

If we consider these four phases, we note that the boy's attitude toward his mother is reversed in almost every detail in the man's attitude to his mate; instead of being selfish it is unselfish, instead of dependence there is independence. Responsibility is undertaken and not evaded. Protection is given, not sought. These two phases, with their notable contrasts, are the two heterosexual phases of the boy's development. They are separated by the two homosexual phases, father and school-fellows. It becomes obvious why these homosexual phases fulfill such a necessary function in the boy's development. They allow of a complete reversal of the attitude toward women. The failure of these phases, for whatever cause, leads to maldevelopment that is likely to be permanent. The man who has not been a normal schoolboy is not likely to be a normal husband. The boy who has been reared as the apple of his mother's eye is likely to demand the same central position in his wife's view of the world. The father who has not experienced paternal inspiration is unlikely to exercise any on his son. The boy who does not cast off his moorings from the maternal haven when the tide draws will have difficulty in reaching the open sea and fullness of life when he makes a belated attempt.

Parenthood is the biological goal of evolution in the individual. As paternity is the biological destiny of the boy, so motherhood is the biological destiny of the girl. The girl, on her part, expresses at an early age her maternal aspirations by playing with dolls, and later on by her intense interest in babies. This aspiration is

associated with whatever childish theory she may have invented or believed, as that babies were brought by the doctor in his bag. Sooner or later she accepts the idea of a husband as a social necessity. But later on, often at about the age of puberty, she realizes that the husband, in some incomprehensible way, is a biological prerequisite to motherhood. It begins to dawn on her that if she is to satisfy her maternal phantasy, she will be required to put herself physically in the power of a man. It is at this point that she normally turns to her father. If his treatment of her mother has been what it should have been, she will reassure herself by the reflection that she would trust herself to a man such as her father, and with perfect confidence. The father thus acts to his daughter as the reconciler of maternal aspirations and vague fears of mating. By this reconciliation she should reach, at about seventeen or eighteen, the fourth phase that should lead to love, marriage, and motherhood.

The failure to achieve fatherhood and the failure to attain to motherhood constitute evidence of biological incompleteness. Civilized society may prate as it pleases about the glorious emancipation of refined people from the bonds of their animal natures, but the fact remains that from the tenderest years to past middle life we are haunted by our biological destiny.

The development of life according to the psychoanalytic theory goes through the following stages: (1) gustatory—the sucking and kissing stage, (2) narcissistic, or self-adoring stage; the baby studies the body, (3) the oedipus complex; a suppressed sex desire of a son for the mother, with hostility toward his father, and the electra complex, the suppressed sex desire of the daughter



for her father, with hostility toward her mother, (4) homosexual—the gang age for boys, (5) heterosexual—love of the opposite sex—when the cycle begins all over again.

Adolescent physical hygiene begins in almost routine information which should be given to each sex.

A. There are certain things which every girl must be taught regarding menstruation. First and most important, she should be prepared for its development. Frequently the physician is asked when, what, and how to tell her. The subject should be brought up by the girl's mother when the secondary sexual characteristics begin to develop; as, for example, when the breasts begin to enlarge. At this time, in an apparently casual way, probably best in connection with the mother's menstrual cycle, it should be explained to her that in a few months she will begin to menstruate. It should be impressed upon the child that this is a perfectly normal thing for girls and that every woman has this monthly period; that when it does take place, she should come at once to her mother, or to some older woman if necessary under the circumstances, and learn how to take care of herself. The subject should never be made unduly important. It is most important, as we have said, that a girl be prepared for menstruation. Many a young early adolescent girl has received a shock at an unexpected first menstrual flow that has had far-reaching effects upon her life, to her physical detriment and future happiness. This point cannot be emphasized too much in view of the possible dangers.

There is one phenomenon associated with the development of puberty in boys which through a false sense

of modesty is frequently ignored, much to their harm and detriment. While as a rule most girls have some degree of knowledge of menstruation, few boys have knowledge that a physiological nocturnal emission of semen occurs at more or less frequent intervals after the establishment of puberty. It is in reality a sexual orgasm which takes place during sleep. It is a decidedly alarming experience to the developing boy, who almost without exception tries to conceal its occurrence, and it has a decided mental reaction. This has been taken advantage of by advertising quacks and charlatans, who in one way or another persuade the boy that this is a sign of "lost manhood." As the testicles of the boy enlarge and repeated congestion takes place, it is not at all uncommon to see an enlargement of the veins or varicocele develop, which usually is of no importance except as a cause of worry to the boy. It is as important that the boy should know that a "wet dream" is a natural and normal occurrence as it is for the girl to be prepared for and know the significance of menstruation.

B. There is a decided difference of opinion as to how much further sex instruction should be given to adolescents; one party holding that "talking about these things only makes them worse," and the other side declaring that ignorance of sex facts is the cause of most moral disasters. There would seem to be a necessity for instruction to be given each sex on certain simple matters. In later adolescence the young girl should be informed as to the nature, the purpose, and the meaning of sexual intercourse. This necessity will appear from the following actual cases:

1. A sophomore in a coeducational college who be-

lieved that "if a man kissed her she would have a baby" (this as late as 1926).

2. A young woman in early thirties who confessed that a man had "hugged and kissed her," and who sought advice for fear "she might be pregnant."

3. A young girl, nineteen years old, Sunday-school and church member, who became pregnant, was cared for in a home for unwed mothers, and who stated as defense that the middle-aged man who seduced her told her that there was "absolutely no danger of her getting into trouble."

With boys, sane information must be given concerning self-abuse and homosexual practices. Figures show that practically every boy has at some time masturbated. Neustatter, English psychologist, declares that masturbation has no harmful consequences whatever, apart from the wrong it engenders; that the effect is psychical, the feeling of guilt, or fear caused by alarming statements and threats of parents. Professor Millais Culpin says that great harm is done by threats, watching, or mechanical restraint. "The treatment of masturbation resolves itself into the treatment of the emotions of adults in regard to it." A positive statement that it is an undesirable and nasty habit seems to be the best method.

The conflict between the sex urge and the customs of society is the basis of the sex problem. The best results in early adolescence are by affording substitute physical and mental outlooks and interests, and thus securing a sublimation of the creative instinct into higher channels. Athletics, games, Boy and Girl Scout movements, collections of stamps—all of these occupy attention and direct interest to other matters.

In adolescence the thoughts of youth are "long, long thoughts," and the mental and emotional life go through a process of idealization. This is the mark of human life. The music of the animal is idyllic; of man it is dramatic, because he can choose and set before himself a purpose. Idealization is the consciousness that one may choose for himself some ideal, concept, or object and determine that his life shall be lived in the light of that ideal, and his purpose is to realize in himself the life which he has chosen as his ideal. High idealism asserts that there are noble purposes in the world which are worth striving for and that the best life is to be found in accepting that ideal.

The ideal is composed of many elements; the conventions of the place in society in which the individual lives, etc.; many so-called ideals are simply unconscious acceptances of the generally accepted codes, rules, regulations, and purposes of his social intimates. Reason plays a part but not the larger part in the acceptance of ideals. The ideal must not be such as to contradict reason, nor be incapable of a reasonable achievement in life. A sense of moral conscience, or the idealism of duty, contributes to the formation or acceptance of the ideal, especially if coupled with the feeling tone, "I ought."

The high ideal is the real, seen not merely as it is, but as it should be, as it shall be. The ideal is the constructive imagination working on the temporal and material, projecting it into the future. It is the vision of the future and is the spring of conduct, the source of morality, and in the long run it fixes destiny for men and nations. "Where there is no vision the people perish." When the organism is motivated by instinct and environment



only, we call it "behavior"; when it is motivated by a conscious ideal, we call it "conduct"; when the end is voluntarily conceived, we call it "purpose."

There must be, however, in every real high ideal a drawing or pulling power. A sense of completeness or of finality, which is objective, exists apart from the individual and holds a fascination or attraction for him. The supremacy of Christianity is that it offers to the individual the supreme ideal of a perfect life in Jesus Christ, a life which promises the fulfillment of all the innate possibilities of life in their highest realization, and a perfect consummation for humanity as an entirety.

A high ideal, once accepted by the mind, gives a sense of value to life. What the ideal stands for becomes a part, through imagination, of the individual himself. It gives a sense of worth-whileness, a realization of significance, of playing a part in the drama of life. It gives a spur to progress; the individual led by the ideal assumes new duties, overcomes new difficulties, and thus advances toward personality. The ideal enables the individual to live in relation to the future, to deny and discipline the immediate demands of the moment.

There is need for a central point of purpose at this time when youth is passing out of the domination of authority into the domain of self-control. Goethe has said, "Everything which liberates the spirit without a growth of self-mastery is pernicious." Psychologically the right ideal is one that can, by attracting all the instinctive emotions, bring harmony to the soul by stimulating the will to a common purpose, weld the whole psychical individual into an organism, and by satisfying the craving for completeness secure self-realization and

happiness. This process of idealization develops moral responsibility by increasing the sentiment of self-control and the self-regarding sentiment. New hopes, new desires, and new standards will arise with a will to power and ambitions for professional or social success. A sense of chivalry, respect for family, and for the opposite sex should increase. At this time the adolescent should develop individuality, through emancipation from parents; which individuality should lead to accepting responsibility, assuming initiative, and a widening altruism as opposed to the egocentric motives.

During the time of adolescence the boy or girl takes on the attitudes of manhood and womanhood, and is initiated into the clan or racial consciousness. Most primitive tribes have elaborate ceremonies for this initiation, and this change of status is ordinarily accepted and celebrated by certain changes in treatment of those around him, more or less consciously, such as, "Well, now you have to be deciding things for yourself; cut out that kid stuff." There occurs at this time a normal process of socialization of life, by which the growing individual passes from the egocentric selfishness to social consciousness. This may be very limited in extent, but it is sufficient to indicate a shifting of the center of interest from self to others.

The Christian ideal is that at this time there should be also a spiritual rebirth, called conversion. William James, in his empirical study of religious experiences, gives this definition: "To be converted, to experience religion, denotes the process, gradual or sudden, by which a self, hitherto divided and consciously wrong, becomes unified and consciously right, superior and

happy, because of its firmer hold on religious realities." James also gave the classical religious terms, the "once born," and the "twice born." The "once born" is a type of religious development without a crisis. In this type there is the conviction of the existence of God acted upon and the experience of intellectual, moral, and spiritual power, illumination, and flashes of deep-seated satisfaction which come in response to prayer. This "once-born" individual is one in whom probably, by good home and school training and the aid of religious institutions, there has been an adjustment in the unconscious of all difficulties and a gradual upspreading of a consciousness of unity with God, and consequent peace.

Conklin says that it is probable that the great majority of persons require for full religious development some sort of a process of conversion, for it indicates a necessary marked point or period in religious development. The conversion experience is a religious, direct dealing of spirit with Spirit, and is not to be identified with the normal process of socialization. This religious change may be evidenced in different forms.

1. The induced formal conversion. To be induced by personal influence, the teaching of the Sunday-school teacher, or the catechism class, the individual gets, by suggestion and mental infection, the whole system of beliefs. This is increased by worship, which includes creed repetition and ritual that make the emotions and beliefs permanent fixtures of the mind.

In its simplest form, as in ritualistic churches, it is the formal acceptance by the personality, now able to make its own decisions, of the truths, beliefs, and religious habits and methods of the church, and a personal

statement of acceptance of Jesus Christ, His way of life and His personal companionship.

2. The development and decision type. There is a process of synthesis in the unconscious mind, such as unconscious cerebration, and in the conversion crisis this synthesis is suddenly brought into consciousness; in the act of decision this experience which has been forming becomes a conscious voluntary choice, with more or less emotion before and after the event.

The process which we call "transference" in psychological language might be used as a figure in spiritual understanding. In the adolescent period the boy naturally and normally "transfers" his feelings and emotions from the mother to a young woman. There is respect for the mother, but the love for one of the opposite sex has elements in it not in mother love. It is a new psychical rebirth.

In the spiritual rebirth there is the same "transfer" of emotion and feeling. That which was Christ's teaching or preaching, as merely objective fact, becomes alive, and the soul enters into personal alliance with the power, the person, and the program of the Christ.

3. A definite crisis with a conviction of sin. The adolescent age is one of idealism and reversals into morbid despair. Where there has been a feeling of guilt and forgiveness, and relief has been promised to those who confess and commit themselves to Christ, the conflict is resolved and there are peace, calm, and joy. Clarke finds in an exhaustive study that among those reporting there is a definite crisis in 7 per cent, a conviction of sin in 8.5 per cent, and a period of depression in 5 per cent; these being all college students.



4. The cataclysmic type. Here there is a change of beliefs, habits, and ideas, attended by an overwhelming emotional accompaniment, caused by the direct effect of divine influence in the life, following the sequence of conviction, repentance, confession, forgiveness, assurance.

The initiation into a new life is a re-genesis by which an individual ceases to be a divided and warring self, and becomes a unified being with a definite direction, under the guidance of consistent purposes or ideals. The centering around a religious ideal is a natural process of development. On the psychological side it is the equivalent of passing from infantilism into adulthood, the acceptance of responsibility, as an individual in society. It is real, definite, a memorable event, and should be regarded by teachers and pupils not as abnormal or unusual.

Adolescence seems to bring the appropriate setting for the awakening of the soul, for the physiological change in youth brings a resulting strain and stress. Beset by the desire to act aright, yet confronted with insurgent and hitherto unknown temptations; dissatisfied with self, repelled by shabbiness and worthlessness, there comes a positive "transfer" in which the hopes, dreams, and desires, born of the enlarging psychical life, are "transferred," centered, and clustered around religious ideals and the person of Jesus. When conditions become favorable, it is generally some emotional stress which precipitates the crisis. Recent studies seem to show that emotion is not as frequent as formerly. Clarke reports that previous to religious awakening, only 14 per cent were emotionally aroused and that the emotional after-

effects were given as: a certain joy and peace, 14 per cent; relief or relaxation, 9 per cent; a sense of morality, 6 per cent; but that 68 per cent reported no emotional aftereffect.

The studies of Clarke, coming twenty years after those of Starbuck and Coe, seem to show that the age of religious awakening has been reduced from sixteen to twelve years, lowered by at least three and one half years. Conklin, however, states that this decline is owing to the fact that recent studies are based on the decision type and that for the crisis type the age is higher.

The test of the conversion experience is in our activity. Religion is life lived in its proper dimensions and set toward its highest possible destiny, and the value of our religious experience is in its motivation of love expressed in life. An unconscious, reminiscent regression to a mere infantile feeling tone of comfort and security is a decidedly negative value and is not the religious motive of love for our fellow men. Christ's teachings clearly reveal this: "Why call ye me Lord, Lord, and do not the things which I tell you?" "Whoever shall do my will shall know of the doctrine whether it be from God or not." "By their fruits ye shall know them." "The fruits of the Spirit are these: long-suffering," etc.

In the religious life there should be a growing sense of naturalness, an ease and joy in the achievement of religious virtues, and a more and more complete changing over of all the areas of life, a more complete loyalty to the will of God in Christ, and a deeper fellowship personally with the Father, through Christ.

These are really the implications of the fact of conversion, and by extensions of that experience through

wider reaches of life. This is the process called integration. Integration is the state of the individual in which his various habits, perceptions, motives, and emotions are fully co-ordinated, resulting in effective adjustment. The integrated person acts as a balanced whole. He comprehends the various aspects of the situations which he faces and relates them to appropriate past experiences. The unintegrated personality reacts in a fragmentary and partial manner, ignoring significant cues that should aid him in adjustment, or else adjusting only a portion of his needs to his opportunities.

Burnham declares that the most fundamental characteristic of normal human personality is unity and wholeness, integration. Integration is not the different parts and functions of the organisms; it means co-operation in functions. The essential characteristic of integration is the power of adaptation, or co-ordinated activity in relation to any situation.

Hinkle states that integration is a prime necessity of living. Mankind possesses many wishes, but there is one great and universal wish expressed in all religions, in all art and philosophy, and in all human life—the wish to pass beyond himself as he now is, the wish for a further attainment, for a new consciousness, or a new state of being in which that greater unity and more harmonious psychic integration is really achieved.

Integration is the process by which all the life is brought into a unified purpose, plan, and personality. The Christian conception of integration is that the person who has accepted Jesus Christ as his Lord and Saviour shall unify his whole life around that principle. It means a purpose large enough to demand all his en-

ergies; the kingdom of God, a master sentiment which is a powerful, sustaining, and dominating motive for all the work and crises of life; the love of God through Christ, and love for our fellow men; a spiritual power sustaining reason, will, and emotion in the struggles of life. Integration is realized in the realm of our activities in dealing with the realities of life. The development of the Christian life is through the idealization and the accepting of that ideal as a personal goal, carrying this out into the strife and battle of life.

In reality, the initiation (or conversion experience) should be regarded as simply the beginning. The test comes when all the instincts, drives, and sentiments are converted, controlled, directed, and sublimated to the one supreme purpose of realizing the will of God in Christ and in His kingdom. Activism teaches that really we know only what we have put to the test of actual practice, and putting it into practice is the only guarantee that we will have a genuine religious experience as taught by Jesus Christ.

The achievement of an integrated personality enables a man to obtain a knowledge of himself and to have an objective attitude toward his own activities, to solve mental problems by facing reality, and to be able to judge and make decisions for himself in the face of the flood of propaganda on social, economic, and religious matters. A character of the finest type, which is complex, strongly and harmoniously organized, and directed toward the high goals or ideals of the Christian religion, enables the individual:

To maintain the right of investigation and discussion, both to obtain information and to correct his own sub-



jective theories by the light of facts and the experiences of others.

To obtain such an insight into the scientific attitude and method as to enable him to make use of this method in the religious life.

To face the conflict between certain "popular sciences" and certain forms of authorization in religious conceptions, and to transcend this difference by a high religion which denies neither the integrity of reason nor the validity of fundamental religious claims.

To find a standpoint from which the differences between the ideals of the religious and the realities of organized religion may be understood and tolerated, without hindrance to the active Christian life.

## CHAPTER IV

### ADULTHOOD

AMIEL says, "We are not born human beings; we are candidates for humanity." Browning says, "Man partly is, and wholly hopes to be."

The nearest normal adulthood is built upon the solid foundation of original capacities and primary drives, and accepts human nature as such. The process of development is gradual evolution without extremes; it involves the systematic organization and the artistic elaboration and refinement of experience and eventuates in a complete self-fulfillment and self-realization. Adulthood means personality balance, the wisdom which enables one to make adjustments to any given situation by a combination of his present motives, his past experiences, and the requirements of the present situation.

Normal adjustment for adults begins with an understanding and acceptance of the facts of physical hygiene as known and taught by specialists today.

A. Food as fuel must be adapted and sufficient for the chemical changes in the body to provide physical energy. The scientific study of the values and effects of food has given sufficient information to enable an ordinary man to run his bodily mechanism as efficiently as he does his automobile. Charles Lamb's pronouncement that "at forty every man is either a fool or a physician" is doubly true with the knowledge of today. Crowding the engine, overeating, overweight, are destructive of the possibility of creative dynamic and mental efficiency. The works of Sansum, McCullom, and Fisher on diet, and Clenden-

ning on physiology, are as important as instruction and care, right gas, grease, and oil for the motor car.

B. Physical living is a slow process of oxygenation carried on, or the combustion of oxygen, which means free air. At night, sleeping out of doors, or its equivalent in air circulation, restores the overdraft on energy made by the day's work.

C. Unused muscles rust as really as unused machinery. Exercise, through work and play in moderation, is necessary to keep the body in fit condition. Walking in the open air with deep breathing aids digestion and elimination of toxins. McPherson Lawrie notes that "muscular exercise not only tones up the action of the heart, it not only preserves the tone of all the muscles, it directly quickens venous blood flow and so greatly assists the circulation of nutritious blood through the organs and tissues of the body." A physician of wide practice says, "Every day men come to me broken down in health and insistently tell me that they have overworked, yet when I question them, I find that none of them has worked as hard as I have. Their breakdown is due to a terrible load of unphysiological habits which they have been carrying, so that they can carry scarcely any load besides."

In the "organism as a whole" the physical coenesthesia (sense of harmonious well-being) is the background for the prime requisite of mental health—an interest in life and work. The peculiar individual structure of each man's personality will determine the direction which his interest will take, but there must be a perennial source of continued interest if there is to be high endeavor with enthusiasm in accomplishment.

"I have lost all interest," is the epitaph to be written over lives which are emotionally dead. Whatever the cause, mental exhaustion, hopelessness, or discontent—manifested in criticism, contempt, or hatred—loss of interest is pathological and should awaken a man to his decline. A man's interest must center in his lifework. The task—the job, one's work, one's occupation—is one of life's great essentials, a protection and salvation to the inferior and an opportunity, a task, a stimulus, and an inspiration to the strong. Burnham says that "in all conditions of life and in all the varied situations in which an individual may be placed, in periods of monotony and stress, when opportunity is lost, when disheartened by failure, even in conditions of distress and despair, the day's work is one's consolation, and with habits of coordinated activity of mental and physical work developed from childhood, or keeping busy at something definitely worth while, one has always an anchor of safety, whatever the mental chaos."<sup>1</sup>

In later years, when some great task is chosen for one's lifework, the part that the unconscious attitudes toward work play in the health and personality may be still more vital and significant. This is illustrated over and over again as soon as an individual loses his task. The workman deprived of his job, if it is a work of skill, or done with zest and interest, or essential for livelihood, is inconsolable; for his job means not only financial reward but personal independence, self-respect, and a worthy place in the social group of which he is a member. The aged man or woman no longer able to continue work is

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<sup>1</sup> From *The Wholesome Personality*, by W. H. Burnham. D. Appleton-Century Company. Used by permission.



lost, and only then, it may be, realizes what a vital part of life one's task has been. The man who retires from business frequently does so with anticipation of rest and pleasure, and when he finds he has really lost his work, he is upset. The unconscious attitudes of satisfaction and the zest of living that he had while at work are all gone, and he realizes then, too late, that the loss is irreparable.

The best work of any man is done when the work expresses his personality, a job which he likes, and in which he can take a real interest. A man who perfectly expresses himself in his work requires few holidays. Men think they achieve their end by the use of the will, but the will is not a very great asset unless it is fired by feeling. The will is only putting in the clutch, the feeling is the motor.

The most constant source of elation is the realization of work well done. To know that what one has accomplished is of real value, that it is one's best, that one has done it at the expenditure of painstaking volition, is to stimulate feelings that render you at peace with the world and contented in your own mind. The more one gains confidence in one's own knowledge of what is true with regard to work, the deeper and more independent will be the satisfaction. In this connection, to develop one line of work or one accomplishment until it is outstandingly exceptional is of greater advantage than to be indifferently equipped along several lines.

Adulthood is a growing development. In any high type of personality there must be an ongoing, striving process of discarding the lower appetites for ends less selfish in character and more important to society as a

whole. This process of sublimation (substituting higher purposes for lower), may work through identifying oneself more completely with a high purpose, and then carrying that identification from thought and resolution into the whole range of life's activities. In middle life these identifications become the form into which life settles and molds itself. The last lines of any life in *Who's Who* consist of formal identifications, such as, republican (or democrat), clubs, fraternities, etc.

In the religious life the highest development is attained by a complete identification with the cosmic purpose of God as declared in the life of Jesus Christ, carried into all the relations with men. The tragedy of religion is when an identification with religious organizations leads to a substitution of formal membership in place of a vital organic devotion to fellow men.

A successful integration around an ideal brings with it a sense of elation and power which is called inspiration. Inspiration includes all those natural insights and sources of power which arise from the conscious and unconscious unification of life, and also all those supra-natural influences and energies which have their source in the spiritual life of the Ultimate Reality. There is a natural inspiration which comes from the sense of elation when "the organism as a whole" is functioning fully and harmoniously. Athletes and football teams at times act as though "inspired" when physical training supports the supreme call of the moment for extreme exertion. Inspiration which comes when the right stimuli have established cerebral communication with energy levels that lie locked and dormant, brings with it a flood of pent-up energies. A high form of elation, not artificially

induced, energizes the body, invigorates the mind, and brings a sense of well-being, happiness, and joy. The psychology of religious living follows the general method of physical, mental, and moral inspiration.

Religious meditation is the deliberate and conscious quieting of the mind, and directing it to the Source of its being in the full expectation that God will communicate Himself, not necessarily by any supranatural outward sign, but through the medium of the mind's own current of thought. The mediate knowledge of God is the way of beauty and faith through nature. To the mediatist all things speak of God. He sees the sky not as mere sky, not even as mere beautiful sky, but as a beautiful thing whose infinite sweep of beauty brings a sense of the grandeur of God. In the green newness of spring he feels the stirring life of God. The birds sing God's praise to Him. When his soul is wrapped in the sight of the dawn, it is not only beauty to which he thrills, but the sacredness of a Presence who comes in the beauty.

Bishop Ernest William Barnes asserts that the new scientific theories have produced a widespread conviction that theism and science will in the end form a harmonious unity, and that the growth of our knowledge of nature will strengthen belief in the existence of God. The values of goodness, beauty, and truth are of supreme importance in the cosmos. They are not merely regulative principles which we infer from experience; they are valid as attributes of God. Religious understanding asserts that they reveal the divine nature. God, in fact, is the source of beauty and truth and, also, He is good.

So one may adhere to truth calmly and confidently in the face of criticism, censure, and even persecution, and

experience a high type of elation. To do one's duty at all cost, to support the true and good under all conditions, brings a reward of deep strength and joy. Through the medium of persons in whom there is revealed a supra-human power, or through the mediation of history—a force not ourselves which makes for righteousness—these may combine to give us a settled conviction of the existence of a God of righteousness, justice, and peace, which conviction, determining our desire and practice, produces a faith governing our lives.

Every idea or ideal which would perpetuate itself in the world must embody itself in some apparatus or organization through which the ideal is to be incarnated, reincarnated, and carried on through successive generations. Religion has seized upon the universal expression of life in worship. Humanity has always and everywhere worshiped, and has developed forms through which the psyche may seek and be sought by the Divine Spirit.

Corporate or public worship is intended to arouse a desire for the presence of God, make that desire vivid, give it expression in praise, adoration, and thanksgiving, and, after a heart cleansing through confession, to impart the divine light and life. The culmination of public worship is the integration of personality in one purpose, the offering, dedication, and consecration of the whole life to the realization of that divinely revealed will of God in the creation of that kingdom of perfected humanity which Jesus calls the kingdom of God.

Worship brings one into fellowship with God, who expects men to love Him and our fellow men, as two different aspects of the same central life attitude, and the purpose of common worship is to give power for



creative living in the ethical task of transforming the world into the realm of God.

There is also a direct private approach which is called prayer, and which is adjustment of life to God in finding the will of God over the whole realm of one's life; particularizing that will in a deep and calm consideration of the part which one's life is to play in actualizing that will in life; a cleansing and purifying of the emotions and desires, and a direction of desire toward the work to be done; a realization of the need and a receptive waiting for the endowment of the necessary spiritual power; a positive identification with the purpose of God in thought and word; and a vicarious intercession for spiritual power to be given to others.

In all forms of the Christian religion the supreme mediation is through Jesus Christ, who is a revelation of the heart, an outgoing love of the Father, God, in the salvation of men from sin to wholesomeness and completeness; who is the unveiling of the mind of God in His cosmic purpose in the establishment of the kingdom of God on earth, who becomes a demonstration of the love of God and an evidence of the transformation which the spiritual life can effect in humanity.

The central final religious experience can be best understood if it too is set into the psychological framework. The still unsolved problem of rationalistic psychology is, How do we know the outer world, and how does the information the senses bring become for us the inner world of knowledge? Broad, an English psychologist, toward the end of his volume on *The Mind and Its Place in Nature*, after enumerating the seventeen theories of epistemology, or how we become con-

scious of the world without, ends by saying, "There are conclusive reasons for rejecting some of these theories and no conclusive reason for accepting any of them."

More immediate is the question as to the nature of consciousness. William A. White (dean of American psychiatrists), in his last lectures, "Twentieth Century Psychiatry," asserts that everyone knows what consciousness is but no one has been able to define it. There is a normal consciousness of God's presence which comes through a sense of fellowship in the same task, a continuing conviction of guidance in critical points in life, an illumination of mind which throws the world into an infinite perspective, and, above all, an endowment of moral strength and power which is unaccountable except by the realization that it comes from without and from above. Beyond this normal apprehension of God there is a supranormal experience which is an immediate, direct, personal, heart-to-heart consciousness of God. Robert F. Horton (English preacher) defines it as a revelation of Christ, wherein He becomes a living, bright reality in close personal relation to the soul, an object of love and the source of a holy life in union with Him in active service to the world. Because this experience has been testified to by a certain Christian group, it has been called "mysticism." It is not, however, the peculiar possession of any particular party, and, unless carried to extreme practices by its devotees, it is the common, normal heritage of all devoted followers of Christ.

To guard this supranormal experience from becoming abnormal, or even pathological, certain facts learned from long experience must guide its development.

A. Personalities vary greatly in their susceptibility

to spiritual excitement. Many extraverts, open only to actual realities, will always be motivated by ethical, conventional, or intellectual mediation and will never achieve an immediate consciousness of the presence of God, which must be taken into account in judging their religious experience.

Many introverts, with a certain mind set, respond to any emotional appeal, ascend into rapture, but never descend into putting the emotion into practice. In a modern development of spiritual life we must realize that there are both extremes.

B. That the mystical experience cannot be defined is not to deny its reality. If it could be defined in exact terms, it would be a thought, a concept, not an experience.

The mystical experience is not primarily a method of discovering truth about God. The immediate apprehension of God; that is, being at one with His creative and expressive life, could not give us the whole of God, or even the most important parts of Him. It is, rather, the glimpsing of His glory, the assurance that He is. There is much that is to be learned of God through mediated experience.

C. The mystical experience may come as an "initiation" in adolescence or as the fruitage of long meditation and continued activity; but how and when it comes is the achievement of the highest and freest type of religious experience. It gives freedom, passing from law to love, a sense of certainty and security.

D. In a rounded religious life, the mystical experience must find expression in practical achievement in the actual world of reality. The cultivation of emo-

tional states or ecstatic visions for the mere thrill of the emotions is destructive of real religious living. The experience must motivate the will, canalize the energy of life in the direction of its decision, if life is to be a really Christlike one. The mystical experience, being a feeling state of very high intensity, cannot be maintained for a continued period as a mere emotion. Even those who follow mysticism as a cult find long periods of listlessness, unemotionalism, and flatness. Translated into action it becomes a motive power, and its overtones or emotional accompaniments on active life give satisfaction, peace, and a glow to religious living to be found in no other way of life.

The psychology of normal religious adjustment as here outlined in the following stages—induction, instruction, idealization, initiation, integration, identification, and inspiration, arriving finally in complete harmony with and consciousness of the Eternal Spirit—results in the achievement of a morally, mentally, and spiritually complete manhood. Stated in terms of practical religious psychology:

A. The adjustment to the personal God removes from the soul the fears or remorse which come from a sense of guilt. The conviction of sin (sense of unworthiness), the act of repentance and confession (exteriorization of sins), and the confident realization of unity with the Father, God, through forgiveness and adoption, give a sense of security and peace in the whole life.

B. It produces a high conception of self-respect in the soul, as an individual, in personal relations with the Infinite. This sentiment of self-respect builds up the



power of self-control and develops deliberation, direction of attention, and strength of will.

C. The complete integration of life in this one master purpose secures inner adjustment and removes the tension between different parts of the life, does away with the wear and tear of diverse drives, frees the spirit from conscious and unconscious inhibitions, and gives peace and poise to life.

A religious life, as outlined, gives a new and master purpose and object for living in consecration to the task of establishing the kingdom of God,<sup>1</sup> thus forestalling the feelings of frustration, uselessness, worthlessness, and giving a sense of value to life. To restate the matter in religious terms: "Now are ye the sons of God." "If the Son shall make you free, then shall ye be free indeed." "Ye shall have power; after that the Holy Spirit is come upon you."

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BOOK III  
MALADJUSTMENT





## CHAPTER I

### INFANCY AND CHILDHOOD

**A**DJUSTMENT is an activity in response to changed conditions in the environment. People vary in the nature and the quality of their adjustment; some persons successfully adapt themselves to their surroundings; others, because of some lack in themselves, or the complex nature of the environment, or through acquiring unfortunate habits, fail to make satisfactory adjustments, and these are called, or are, nonadjustments or maladjustments.

The scientific study of the failure to adjust is called abnormal psychology. Each individual has a certain number of traits, and these traits vary in degree, so that practically every individual varies from the central tendency or median line of the population at large, being either above or below this line. In other words, every person is abnormal in some respects. Most people have some more or less important maladjustment which is not their fault but from which they suffer. Abnormal psychology is the study of these more or less serious deviations from the normal, including those which are to be classed as morbid.

The more serious deviation comes under the study of psychopathology, which embraces the psychology of a considerable variety of diseases, defects, and conditions. It includes the psychology of the psychoses or major mental diseases, and the psychology of the psychoneuroses or minor mental diseases. It also includes the psy-

chology of epilepsy and of mental defect or feeble-mindedness. It may likewise be regarded as embracing the psychology of the effects of drugs, and the study of the mental aspects of ordinary physical diseases. All these conditions have, of course, other aspects as well as the psychological, which must be considered by the psychiatrist and physician.

The latest investigations of medical science are discovering the extreme importance of the time of infancy and early childhood in correcting all forms of defects and abnormalities. On the physical aspect, the simple matter of correct nutrition in the early years is emphasized. I. Newton Kugelmass (specialist in children's diseases) reports that mental growth is retarded by malnutrition and regained by sound nutrition. A group of one hundred and sixty-four undernourished but mentally normal children improved twelve points on the I. Q. scale; but the younger the child, the greater the recovery. Complete mental recovery is possible under four years of age, and slight recovery thereafter until the sixth year. A. T. Cameron (psychiatrist), in his *Recent Advances in Endocrinology*, has demonstrated, and shows by actual photographs, what can be accomplished in endocrinopathies (deficiencies of the ductless glands), by the administration of thyroxin or other glandular extracts. Physical defects which are hereditary, congenital, or acquired in infancy are now receiving special medical attention and orthopedic surgery, and special schoolrooms for the physically handicapped combine to prevent both physical and psychical maladjustment. Between physical and psychological abnormalities lie all the ill conditionings due to deficient nutrition, bad

sanitation, absence of play activities, and all the evil defects due to poverty. This is the field of social pathology which must be understood in its relation to individual problems.

In infancy and early childhood the physical and mental are closely interwoven. Physical defects make it hard for the child to adequately adjust. Defects in any of the senses, as nearsightedness, deafness, or the congenital effects of syphilis; or any bodily abnormality, such as club-foot, cleft palate, etc., seriously affect the life, producing abnormal, morbid, or psychopathic personalities. Mental defects and deficiencies of great variety, from mere dullness and stupidity through morons and imbecility to idiocy, produce types of unusual or abnormal personalities, such as: isolated, queer, seclusive, radical, and suspicious. These personality defects manifest themselves in inadequacy, emotional instability, hypersensitiveness, shyness, quarrelsomeness, lack of ambition, or initiative, unsociableness, and all forms of juvenile delinquency.

As an element of maladjustment there must be considered also the aftereffects of serious illnesses, such as the sequela of scarlet fever, arthritis, infantile paralysis, and other serious diseases of early life. Here too must be reckoned the effect of gland disorders, especially in over-activity. Many children develop compensatory reactions to the inferiority feeling produced by these defects, such as aggressiveness, flight reactions, and all sorts of behavior anomalies. The roots of many neuroses in later life are found here: neurasthenia, in which a patient is sure his eyes are weak, stomach ailing, legs impaired. It is a condition in which unconsciously these

organs are used as substitutes for others, concerning which, as a child, the sufferer had grave and painful misgivings. Adler's theory is that a child who has lack or organic inferiority may become affected without knowing it and these may react in "weak-eyed artists," "deaf musicians," and "last thing in the world he ought to think of doing."

Beyond the physical and psychological abnormalities there is an extensive field of failures in adjustment due to bad sanitation, deficient nutrition, absence of play activities, and all the evil effects due to inadequate income. All these, however, are a part of social pathology and cannot be included here.

There are several important deviations which begin in infancy and which have lasting effects. The first is "temper tantrums," or an uncontrollable spasm of rage in the infant which continues at times until the child becomes blue in the face from holding its breath. It is probable that the child does not really intend to cause as much of a spasm as sometimes results. The infant is in a rage over something, and this rage causes an emotional explosion which he cannot control, and he is then frightened or further angered that he cannot control himself. To establish a habit of exhibiting "temper tantrums" may prove very serious in later life. If anger or rage produces an uncontrollable spasm of temper in later life, there may be dangerous deeds done, or, in the marriage relation, an entire destruction of mutual love. This, however, is a matter that needs strict parental training. If the infant obtains what he wishes by his "tantrums," they will continue, but if he is allowed to work out the spell without attention, gradually he will



learn to control himself. Ordinarily, he will of necessity stop holding his breath because he can no longer control his breathing, and even a dousing with cold water has been found effective as an immediate remedy. However, if frequent and long-continued, the infant should be taken to a physician for consultation as to the danger of true convulsions.

Another unfortunate development in infancy and early childhood is a feeling of anxiety created by a combination of fear, dread, and rage. The infant needs the support of parental love and care, and when the withdrawal of this is threatened, the reaction is fear, which may grow into a permanent general dread or anxiety. This condition may result when parents leave small children for any length of time, and is almost sure to ensue when there is a separation of the parents.

Many, if not all, adult psychoneuroses have their origin in childhood. The development of normal childhood depends on shelter and security, and this is only possible in a happy and united home. Problem cases come from unhappy homes due to incompatibility of husband and wife, and it is established that children from unhappy or divided homes find it harder, when grown, to establish happy homes. More important than the one definite event is the general atmosphere of childhood, consisting of a large number of trifling events, which may give the child a wrong attitude toward life or a wrong attitude toward self. That is to say, abnormal conditions of mind are determined much more by the atmosphere of childhood than by any one shock. These influences usually work by way of suggestion.

Abnormal experiences of childhood, whether due to

a single event or an unnatural atmosphere, may have no immediate ill effect, yet the impression is made, and the complex produced lies latent until later in life, when some shock or strain, insufficient in itself to produce a neurosis, becomes active and lights up the complex into a definite moral or nervous disease. This accounts for the view held by most psychotherapists that all functional nervous disorders, even of later life, such as the breakdown of the girl of eighteen, the woman of thirty, or the business or professional man of fifty-five, originate in childhood. It is the experiences of childhood which predispose to the breakdown of nerve and character in later life.

The place of the sex drive in infancy and childhood is under very serious discussion at present. Since the work of Anna Freud, there has been a great emphasis on the sexual life of the child. The Freudians say that the oral, anal, and genital play and curiosity of children is "sexual" in the same way that pleasure is derived from adult sexual practices. This interpretation has been developed with great thoroughness in the psychoanalytical therapy of English and Pearson, and Paul Schilder in this country, and Neustatter in England. Bannister (psychologist in St. John's College, Cambridge), while acknowledging the fact that masturbation is common in most children for a time, definitely rejects the Freudian interpretation. He states that sexual life begins early and continues to mature, but is covered over by the enormous range of the child's activity until physiological puberty, when sex becomes more dynamic.

## CHAPTER II

### ADOLESCENCE

IN that very interesting study, *What It Means to Grow Up*, Fritz Kunkel pictures adolescence as a sort of a settlement day when all the phantasies and escape mechanisms of childhood must face the test of reality, and that "pay day" settles the basis of adult life. The psychoanalysts might picture it as the moment when the pleasure-pain principle of living faces the reality principle. In German folklore it is the *Sturm und Drang* time as depicted in Goethe's *The Sorrows of Werther*. A dispassionate enunciation of the various crises which occur during this time will aid in that understanding, without which intelligent assistance cannot be given.

There is, to begin with, a stress which comes from the physiological growth of the body. The boy suddenly begins to wear neckties, demand better suits of clothes, and at the same time becomes aware of protruding hands and feet. The awkward age, with either boy or girl, has its peculiar poignant distresses. The important physiological strain, however, is in the oncoming of puberty with its powerful dynamic drive of sex. To properly assess the influence of this drive it is necessary to consider the ramifications and abnormalities with which it is attended.

The first step is to face the fact that the instincts are natural and normal, and that the sex instinct is the strongest of all our instincts. Unfortunately, by reason

of the artificial nature of civilization in which we do not need so strong an urge, there are vast quantities of sex energies left over. For most normal men and women this residue of sex energies is a problem to be dealt with by the personality, and, if its force does not find an outlet in the normal way, the energy must be sublimated into some other activity satisfactory to the self and to the community. This is the first fact to face, that the origin of impure thought is the misdirected energy of a very powerful instinct.

The second fact to face quite frankly is that sex hunger or feeling is not in itself wrong. Many young people torture themselves because at certain times feelings of which they feel ashamed sweep over them. It cannot be too definitely said that it is not more sinful to have these feelings and acknowledge them than it is to be hungry for food. Sex hunger is not more wicked than hunger for food, unless you become morbid about it, and by gloating over it, and by turning it toward a perverted goal, you make it into sin.

In the case of the sex instinct it is important to distinguish between fundamental abnormalities and unusual sex practices. There is a distinction between abnormalities in the sex drive or craving, and unusual sex practices or habits which may be resorted to, not by preference, but in lieu of the actually desired sex activity. On the other hand, a fundamental abnormality in the sexual impulse may occur without any overt sexual indulgence. There are numerous peculiar and unusual sex practices or forms of sexual indulgence, but only some of the fundamental abnormalities will be described here.



One kind of abnormality in respect to the sexual object is homosexuality, or sexual inversion. In this case the sexual craving is directed toward a person of the same sex. There are various degrees and forms of homosexuality. In some cases the homosexual person has the bodily form or the mental makeup of a person of the opposite sex. The homosexual man is effeminate, or the homosexual woman is masculine, in physical or mental characteristics. In other cases, however, the homosexual person has none of these mental or physical characteristics, but may be quite normal in all other respects.

Homosexuality occurs in both men and women, and is probably much more common than is usually supposed. It is possible, of course, to be fundamentally homosexual without indulging in homosexual practices, and, vice versa, indulgence in homosexual practices does not necessarily indicate a fundamental homosexuality. A homosexual instinct may form the nucleus of a sentiment of homosexual love, just as a normal sexual instinct may form the nucleus of a sentiment of heterosexual love.

If the sexual impulse is aroused by some inanimate object, it leads also to marked deviations in sexual behavior. This form of sex abnormality is known as "sexual fetishism." Fetishism may be due to the conditioning of the sexual instinct to some object associated with the original sex object, such as a handkerchief, shoe, glove, hair, or lingerie. It frequently results in a mania for collecting these objects, and may occasionally lead the subject into crime, such as theft or hair-clipping (in the days of long hair).

One class of such abnormalities appears to be due to an exaggeration of the preliminary or preparatory sexual impulses and behavior, such as touching and looking. Exhibitionism and inspectionism belong in this category. The former is the tendency to exhibit or expose oneself sexually, while the latter is the tendency to see and examine the sex object.

Sadism is the gratification of the sexual impulse by cruelty, that is, by inflicting pain upon the object of lust. Masochism, on the other hand, is the gratification of the sexual impulse by suffering pain. Both sadism and masochism may occur in symbolic forms. In these forms the subject's impulses are satisfied by the humiliation of the object of sexual desire, or by submissiveness and self-sacrifice.

The standard classical work of Ellis, the studies of the women by Davis, and the experimental work of Weatherhead and Oliver are all of importance to an understanding of this theme.

The anomalies of degree are of two varieties. First, *anesthesia sexualis*, or sexual frigidity, a diminution of the sex drive; and second, *hyperesthesia sexualis*, or eroticism, an increase of the sexual craving. If the latter occurs in a man, it is called "satyriasis"; if it occurs in a woman, it is called "nymphomania."

The qualitative anomalies may also be divided into two main groups: First, anomalies in which the sexual instinct is aroused by an unusual stimulus or object; and, second, anomalies in which the sexual response or behavior takes an unusual form. These two kinds of qualitative abnormalities generally occur together, since one usually involves the other. An abnormality mainly

of the first sort is autosexuality or autoeroticism. In this case there is no sexual object other than the subject's own body. Autosexuality is likely to result in the practice of masturbation. But it is important to bear in mind that this practice may also occur without any fundamental autosexuality.

The effect of masturbation is in dispute. English and Pearson state that in no child or adult can masturbation produce any physical or intellectual damage. Neustatter states that the practice is devoid of harmful consequences. Both these therapists state that there are harmful psychical consequences, such as feelings of disgust, guilt, self-depreciation. Josslyn, on the contrary, maintains that the testicles are in relation to the whole glandular system and that sex excesses do physically reduce vitality. *Destiny and Disease in Mental Disorders*, by C. Macfie Campbell (psychiatrist in Harvard Medical School), contains the history of forty-three cases of schizophrenia in the Boston Psychopathic Hospital. In four cases there had been early temper tantrums and twenty-eight cases out of the forty-three had a history of masturbation with more or less serious psychical effects. Such a large percentage of autoerotic histories would indicate some relation between these practices and mental disaster. The problem of the adolescent is not only to pass safely from homosexuality to heterosexuality, but further to keep the sex urge within bounds when directed toward the opposite sex.

Under the freedom of life allowed to the youth of today there is always danger of "explosion." There is no code of honor under sex excitement, and at a certain point in "heavy petting" the biological urge for repro-

duction takes charge and eliminates every other consideration. This involves the danger of pregnancy, abortions, and illegitimate births—the only difference between the classes of people being that the well-to-do have a better knowledge and are better able to afford contraceptives than the poorer.

It is a well-established fact, known to all physical trainers, that continence in sexual matters, instead of being harmful, builds up stamina and vitality, while “free love” is detrimental to both physical and moral life. The libertine free love life is opposed to biological principles which protect the home through the parental instinct. Society, in upholding the moral laws, is fulfilling the laws and end of nature. The seeking after sex adventure leads to the habit of promiscuity, to abnormality and after marriage to infidelity. This type of life destroys self-respect and brings self-condemnation. One of the outstanding advocates of greater sexual liberty, Dora Russell, testifies: “Even those who repudiate the Christian synthesis and imagine themselves free of all prejudice, are a mass of tormenting inhibitions, doubts, and inconsistencies when they approach sex. Their imaginations remain filled with false notions of restraint and refinement; they break free and alternate between coarseness and self-pitying disgust.” This from the author of *The Right to Love*.

The spirit of idealism reaches its climax at this period of adolescence. The attitude is, “The world must.” The young idealist is impatient with any delay in the realization of what he considers the world ought to do. There are shocks which come from a realization of the extreme materialistic basis on which at present society



is built. The emotional disturbance arises from the discovery that "what is" is not "what ought to be."

There are disappointments when youth comes in contact with sordid, self-centered, selfish, aggressive types of men who regard only their own interests. Here too are personal ideals which are destroyed. The chivalric conception of ideal womanhood may be killed by personal experience with a perfectly selfish woman, perhaps under great strain of emotion in a love affair; the realization on the part of the young woman of the selfish sex drive of men and a willingness to sacrifice honor and love for the satisfaction of that drive, resulting in the disaster of seduction.

The youth also is in a constant struggle with the sex drive; he gives up to abuses which cause a sense of inferiority, of sinfulness, or of remorse, and this may easily lead into disaster, mental or physical.

This idealism may lead to wrong adjustments to reality:

a. The shock of destroyed idealism may lead to the denial of any ideal, and integrating on the animal level, merely vegetating, or following the dominating instinct of the moment.

b. The ideal of Stoicism based on pessimism and agnosticism fostered by certain intellectual studies.

c. Aestheticism or the refinement of sensations or the sex drive, as seen in *The Right to Love*, by Dora Russell, or *Dawn*, by Dreiser.

d. The ideal of pure selfish humanism, as in John Cowper Powy's *In Defense of Sensuality* and in *The Meaning of Culture*.

In adolescence, the capacity for interpretation, learn-

ing, adjustment, and problem solving, or intelligence, comes to its maturity. Knowledge is expanding by leaps and bounds, but for the needs of life, knowledge is too limited in scope; the dreams and ambitions of youth are far beyond the knowledge of youth; many concepts are still decidedly childish. The gap or collision between "what ought to be" and "what is" is a great shock to the mind and may result in a retreat from reality.

In order to achieve a distinctive personality, the adolescent must emancipate himself from parental control and develop the power of self-regulation. To a certain extent he must break with his parents. He is thrown in with groups with different ideals, and if he remains in the control of the parents, he loses his self-respect and is "cut" by his companions. The parents wish to save him by their advice, which comes from their experience, and the conflict brings mental suffering. If, however, the parents are well balanced, a compromise can usually be effected without breaking home ties.

There arise in late adolescence economic problems, such as the choice of a profession, the task of earning a living under present conditions when four hundred thousand young men between eighteen and twenty-four years of age are in the ranks of the unemployed in New York City alone. The youth of today is faced with many difficulties in relation to religion. Youth is naturally the time of revolt against precedent, convention, and the established customs of his time and would destroy immediately the old to replace it with a new and different manner of living. The high-school or sophomore oration is a perfect example type of this immature wishful thinking, and it is only through experience of some years

with reality that youth condescends to take part in movements which are perhaps slower but which may lead to actual progress in life as it is.

More important, the critical youth easily discovers the difference between a public profession and the private or business lives of those who constitute the body of organized religion, and without realizing that every religious person "partly is, and wholly hopes to be," condemns the religious profession as "hypocrisy." Or he may decide, as did Dreiser, that religion, at least in its organized forms, is rather a hindrance than a help to getting on in the world.

Intellectually the modern youth is trained in one or more of the sciences, and the religious life does not seem to be able to stand the tests and methods of these sciences; hence skepticism arises as to the validity and reality of religious concepts and claims. Especially, many of the assertions of conservative creedal religion seem to have been invalidated by the advance of modern knowledge. In face of all this, the thinking young person must create for himself a personal living religion and philosophy of life. He cannot be satisfied with second-hand creeds, or codes, or philosophical systems, but must use this traditional material as a guide in arriving at a sane, sensible adaptation of moral and spiritual values.

In view of all these strains and stresses of adolescence, it is not strange that there is a rather definite type of mental illness called *dementia praecox* which means premature (*praecox*) deterioration of the mind through loss of mental power. It generally begins toward the end of adolescence, before twenty-five years, although there may be a delay in its development. It generally

makes its approach in the enfeebling of a previously healthy mind, shown in lapses in the power of attention and of concentration, and dullness or stupidity. The mind becomes inactive, forgetful, and indolent. The patient wants to be let alone, becomes suspicious or over-conscientious and self-reproachful. In the more pronounced states there may be attacks of maniacal excitement—melancholic frenzy, delusions, hallucinations, and sudden homicidal or suicidal violence. When a person at or near college age begins to show prolonged depression associated with self-reproach, and a slowing-up of muscular and mental activity or excitement, volubility and restlessness, quite unlike his ordinary self, he should be treated with great care and put under the proper psychiatric care. Many universities, led by the University of Pennsylvania and Yale, have established consultation clinics by means of which many mental breaks will be averted.



## CHAPTER III

### FAILURES IN ADULT ADJUSTMENTS

**N**ORMAL maturity means the development of a balanced personality through the integration of the whole life around its ideals. Adulthood means the replacing of distinctively childish impulses and infantile attitudes by conduct which is rational, self-controlled and directed toward some chosen end. The simple deviations from the normal rhythm of growth may be classified into several divisions:

1. Precocity, in which there is an early abnormal development of either the physical or mental powers. These cases are generally caused by some perversion of the activity of the endocrine gland, and are a subject for medical treatment. Ripley ("believe it or not") tells of Charles Charlesworth of Staffordshire, England, born May 14, 1829, who reached maturity and grew whiskers at the age of four and died at the age of seven.

2. The undeveloped type is when the components or processes have not been developed. The failures may be:

A. Mental undevelopment, such as we find in children, feeble-minded persons, savages, and some uncultured folk in civilized communities. They are primitive in intellect, temperament, and character. Their thinking is childish, magical, and dreamlike; it does not conform to logical and scientific standards. They consult witches, fortunetellers, and magnetic healers. Their feelings are coarse; they are the "all-or-none" type, with

impulses crude and uncontrolled and behavior uncouth and expressive of their affects and drives. They are not constrained by bothersome ideals.

B. Moral and emotional failures to develop are due to the failure of an integration of life in some purpose or ideal. The lack of integration is shown where:

1. There is no real personality; the self is simply the expression of the desire which is dominant for the moment.

2. There is no resistance to outside forces, disasters, or calamity.

3. No consciousness of value in life exists. Worthlessness, emptiness, lead sometimes to self-destruction from not being able to stand the strain of the sense of frustration.

4. Unintegrated personalities are always subject to a real schizophrenia, or divided mind, in mental illness.

5. The nervous strain may be so great in holding the different selves in balance that there is no energy for work in life, resulting in "nervous breakdowns."

C. The type in which fixation of growth occurs in the earlier stages. Fixation is arrest of emotional growth and may occur at any stage. According to the Freudian conception, fixation occurs on the different psychosexual levels.

1. There may be fixation on parents: A love which desires to possess the denied individual, thus forming the oedipus complex, the love of a boy for the mother and jealousy of the father; or the electra complex, love of a girl for the father—if either of these is very severe, it may produce neuroses. Entirely apart from the Freudian "complex," everyone is familiar with children

who are unable later to detach themselves from family bonds in order to love someone else, a condition that causes much friction in later marriage relations.

2. Fixation on oneself. This narcissus complex is very common. It is a natural stage, but it should not persist. This is the type of personality which is abnormally concerned with personal appearance and adornment and which, ever-present today, testifies to fixation in the "self-love" stage.

3. Fixation in homosexual stage. The "gang" stage of mob psychology, subject to suggestiveness, is when sex habits are fixed on the same sex (homosexuality), and this may be temporary or a fixed attitude.

All these variations must be held in mind, as they explain the "mind sets" of many people, such as "Peter Pans," who refuse to grow up; the "flapper" mother, and grandmothers who must be cautioned to "be your age"; husbands who are "not understood" and do not know that they are regressing to a desire for infantile mother comforting.

As a matter of fact, however, very few people reach adulthood in its fullest meaning, and most persons carry survivals from childhood, petty childish jealousies and prejudices, and in moments of emotion we turn back to primitive childish methods of expression. These defects may be comparatively harmless when the individual lives in conditions where they may be tolerated, but in the stresses and strains of married life they produce disaster. The most prominent psychiatrist in Los Angeles gives infantilisms and temper tantrums as the most frequent cause of divorce in the most frequently divorced moving-picture colony.

3. Regression is a retrograde devolution toward earlier and lower levels of function and may be the result of physical brain degeneration or may be caused by mental or emotional shocks or strains. A physician recently reported a case in which a woman of seventy regressed progressively to the stage of a helpless infant in the course of a brain disease.

It is necessary here to understand that part of mental life which is related to "The Unconscious."

According to the neurological theory of the unconscious, there is no subconscious or unconscious mind. All unconscious processes are neural processes. Memories are conserved as neural traces or neurograms, and, in remembering, these dormant neurograms are reactivated. Similarly, the unconscious motives of behavior and the unconscious causes of intuitions and neurotic symptoms are of a purely neurological nature. Such factors as neural energy, inhibition, facilitation, and organization are involved. In unconscious perception an impression is made upon the nervous system without any form of consciousness whatever. And in automatic writing and other forms of dissociation, the activity of the dissociated neurograms is not accompanied by consciousness. This theory has been also called "the theory of unconscious cerebration." It has been held by some of the leading neurologists and psychologists, such as Carpenter, Ribot, and Munsterberg.

According to the psychoneurological theory, the unconscious, like conscious, processes are always neurological, but in addition they may also be mental. The chief exponent of this theory is Morton Prince. Prince uses the term "subconscious" in a generic sense to include the



unconscious and the coconscious. By the unconscious, Prince means the purely neurological. The dormant neurograms are the basis of memory. The coconscious is a coexisting but dissociated consciousness related with the functioning of the more complex dissociated neurograms.

According to the mental theory, all the unconscious events and processes referred to above are nevertheless mental. Memories and ideas are conserved as such in an unconscious mind, and the unconscious causes of behavior, neurotic symptoms, and intuitions are likewise mental. There is a considerable diversity of opinion among the exponents of this view. Some regard the unconscious mind as a fact, others, as a hypothesis; some regard it as inferior to the conscious mind, others as superior; some believe it originates in the individual during his lifetime, others believe it is racial in origin. Some of the advocates of the mental theory of the unconscious have a decidedly mystical attitude. They may believe that consciousness is but a small emerging portion of a large sea of mind below the threshold. This subliminal or subconscious mind constitutes a self which is often considered as superior, both intellectually and morally, to the conscious self. This is the position of psychical research and of spiritualism. Such mystical views have no place in a scientific treatise. The most systematic exponents of a mental theory of the unconscious are the psychoanalysts, particularly Freud and Jung.

A definite habitual reaction based upon one of the primary instincts, which has become established in the mind and has a very great emotional content, is called

a complex. In its widest sense it is a connection of ideas due to previous experience which has for the individual a large emotional value. It is formed by the attachment of the instinctive emotions to objects or experiences presented by the environment, but which, owing to their painful or repugnant character, are unacceptable to the self. A complex may be regarded as an unusual sentiment involving strange beliefs and leading to peculiar or irrational behavior. A complex may be conscious, unconscious, or only dimly conscious. Unconscious complexes have been most frequently discussed, and some authorities apply the term "complex" only to unconscious systems of ideas, feeling, and impulses. But the term may be likewise applied to such systems when they are conscious or partly conscious, if they lead to peculiar beliefs and behavior. It is, of course, not necessary to suppose that unconscious complexes exist as mental states and processes. They are more probably conserved merely as neural patterns and neural processes.

Freud says, "A complex is the term applied to an unconscious constellation of trends, ideas, and emotions centered round a particular topic, as an attitude of dependence and love to a parent of opposite sex—the oedipus complex."

Religious complexes also deserve special mention. These take the form of peculiar religious beliefs, and frequently result in the formation of strange religious sects. The religious sentiment is so complex that abnormality in almost any mental process has an effect upon it. This is particularly true of abnormalities in the basic instincts and emotions, such as fear of the

sexual instinct. For example, a pronounced sadistic or masochistic impulse may color the religious sentiment and lead to an emphasis upon suffering, sacrifice, penance, or "hell-fire" doctrines. It is interesting in this connection to note the frequent mention of blood and suffering in religious hymns.

Suppose a complex is for some reason out of harmony with the mind as a whole, maybe because of its painful nature, or for some reason incompatible with the mind's general views and principles. There comes a struggle between the complex and the personality. The two forces tend to mutually inhibit each other; mind will be divided, and conflict arises between the complex and the personality. The lover of another man's wife is characterized by a condition of unpleasant emotional tensions, and conflict cannot persist indefinitely—it is a biological necessity that a way out should be found.

How may the conflict be met? By a normal rational solution? The man himself, the organized self, may be strong enough to unify and control the impulsive part of his nature. McDougall has finely said, Happy is the man whose character is formed from a well-balanced disposition under the influence of unquestioned ideals and of a supreme goal or master purpose. His self-respect and ideals to which he is attached (that is, for which he has acquired abstract sentiments), will supply him with dominant motives in all ordinary situations, motives strong enough to overcome all crude promptings of his instinctive nature; and he is in little danger of becoming the scene of serious and enduring conflicts. Especially is this true if he has learned to know himself, has learned by his reflection and frank self-criticism

to understand, in some measure, his own motives, and has formed a sober, well-balanced estimate of himself, of his capacities, his purposes, and his duties. He may recognize that the two purposes or ends cannot be achieved, and, after weighing the merits of each, consciously decide that one must be abandoned in favor of the other. This deliberate adoption of a selected line of conduct is the rational or ideal way. He may subordinate the impulsive, instinctive, through moral control of ruling personality. The power of inhibiting the immediate reaction of the motor nerves and muscles to sensory stimulation is conspicuously absent in children. If a child is hungry, it cries; vexed, it displays anger. It sees a butterfly and chases it; it forgets, not disobeys.

There are multitudes of men and women who cannot be said to possess any character. There has never been any development of the higher faculties, or they have been improperly developed, and life presents itself permanently as an enjoyment of the senses. They must respond to the summons of every casual allurements, and they fritter away a barren and futile existence in pursuit of what is called pleasure, producing infantilisms of feeling, tempers of mind and of judgment. The solution of the man of character is the subordination of the impulses to moral reason. Some rash persons have formulated the maxim: Avoid suppression and you will avoid conflict, and hence also pain and disorder. But that is an impossible policy. Conflict is inevitable and suppression is necessary for those who would live on a higher plane than brutes. Without conflict and suppression there would be little or no sublimation, and sublimation is civilization. W. Stekel says, "Suppression



enables us to live the life of a civilized man who is willing to comply with all the social and ethical demands of his age. It is also the key to that inner culture, the life on a higher plane which distinguishes us from the common herd."

The drive, the impulses, may be sublimated to higher purposes. The word originated by Freud, and meant the setting free of infantile, fixated "libido." Sublimation is used to denote all instances in which the instinctive energy sustains activities which are higher, either in an intellectual or moral sense. In the intellectual sublimation the instinctive goal remains unchanged, but the procedure adopted for its attainment may be infinitely more complex and intellectualized than the natural procedure. Sublimation is involved in the formation of all higher sentiments. Tarzan, the cave man, is one type of instinctive passion. Love, the tender protective impulse, is a higher type. There may be an unconscious sublimation.

For true sublimation, childhood or adolescence is the best period, and thus we see that education becomes doubly important, and especially moral and spiritual education. The function of all education should be to help the growing mind to acquire sentiments within which the impulses may be truly sublimated; that is, we help the child to become interested in ends which are social, beneficial, or at least harmless—ends through which the impulses get outlet without themselves being the motive for the activity which the end involves. It is to be noted that the activity in which the tendency is sublimated is always allied to the tendency itself. The sex instinct may be sublimated in any creative activity;

the pugnacious instinct in activity roused by the thwarting of some ideal end of a sentiment; the acquisitive tendency in collecting stamps, antiques, etc. This is a conscious or suggested, or willed sublimation. There may be a solving of the conflict through separation into compartments. A man may be successful in preserving both these groups or ideas in the mind, and avoiding carefully all contact or interaction between them. An instance is a man perfectly moral in private life, but who has a very different moral code so far as his business transactions are concerned. A man applauding virtue in a play and going out to immorality is a familiar figure. Love is blind; it sees only good, and any statement by parents against the loved one is "interference" in his or her business. The worst case is the man who says, "I never let religion interfere with my business." As in *Dr. Jekyll and Mr. Hyde*, there are deliberately willed double personalities. So-called "hypocrites" in church have used this as their defense. One of the problems of preachers is to break down this duality. It cannot be done by mere argument; it must be done by enforcing the ideal, securing a "transfer" to that ideal, and identification—"I am a Christian, I cannot do otherwise."

Some minds are not sufficiently tough or blasé to carry on this duality, hence they resort to "repression" of the undesirable ideas. The process of banishing a complex so that it is prevented from appearing in consciousness is the essential character of the mechanism of "repression." A man may have done some evil deed of which he is now ashamed. The memory is "complex" from his thoughts; he keeps studiously away from the repugnant memory; as in an elderly spinster, who refuses to ac-

knowledge that she has any sex feeling or temptation, and it results in prudery. An illustration of unconscious repression is the forgetting of things which we wish to forget—"we forget to pay bills."

Repression becomes a cause of dissociation. Although the complex is thus forbidden to manifest itself in the field of consciousness it does not thereby cease to exist, and it has a disturbing effect upon the homogeneity and unity of the mind; it becomes abnormal. The complex continues to exist in the deeper layers of the mind, and as it is deprived of its normal interplay with the remainder of the mind it is only able to express itself in the field of consciousness by the production of ideas and images which are sharply cut off from the remainder of the conscious stream. This results in a dissociated or an abnormal double personality.

A system of ideas is said to be dissociated when it is divorced from the personality and when its course and development are exempt from the control of personality. The dissociated ideas may be many simple obsessions, such as, "Can't get a tune out of my mind." Or, they may become abnormal compulsions, as a woman who must look at the number of every bill, or the "washing mania"—touches a street car—and so she must go back and wash her hands. In hallucinations, the patient hears voices saying, "He must be punished for his sins." The voices existed in the patient's mind; they were a portion of his own consciousness, but not part of his personality. The system of ideas is dissociated from the personality and the hallucinating voice is the mode in which the dissociated system announces its existence to the personality.

Irrationalities and discrepancies of action are separate streams—particles not under control of will and not under the control of reason, manifestations of the repressed complex. The complex cannot express itself directly, because of a certain resistance, or censor, opposed to the normal action of the complex. The complex must express itself but it is no longer normal or direct; the path it takes is sufficient to elude the censor.

These disguised dissociated ideas present themselves in the mind as:

1. Projection—the complex is regarded not as belonging to himself but to some other real or imaginary person. The fault is put on another person where it can be rebuked, as when a husband projects on his wife his own failing. Preachers should carefully consider the fact that Miller attributes this form of substitution or rationalizing especially to the clerical mind.

2. Or, we may contrariwise award to ourselves the virtues of others.

3. Or, there may be what the psychoanalysts call “transfers.” We identify Mr. A. with Mr. B. and treat Mr. B. as we would Mr. A., as when a patient “transfers” his feeling to his physician or pastor because “he looked like my father.” Or, the transfer may be negative from some unconscious identification:

“I do not like you, Mr. Fell.  
The reason why, I cannot tell.  
I only know  
I do not like you, Mr. Fell.”

4. Or, to protect the self-regard or pride of the ego, the person unconsciously overemphasizes and develops



the part of the personality which is patently weak, as Demosthenes, who stuttered and became an orator, or the boy with a shortened limb who became the best mile runner of his day.

5. This conflict may eventuate in a breakup of the ego, the unity of the self. This may be a moral breakup in a giving up of any purpose, and descending into the whim or passion of the moment. Or, the outcome may be schizophrenia (scissors mind), or a divided personality in some form of mental illness which may be all but incurable.

The study of mental maladjustments must begin by understanding the meaning and results of fatigue. Bianchi has given a picture of the physiology of fatigue. In the neuron, with the intense cerebral work, the protoplasmic substance is consumed, but the blood continuously brings to it substances with which it is formed anew, just as a diligent hand adds salts to an electric cell. But if the activity is excessively prolonged, its functional activity loses its intensity and the work produced diminishes to a minimum. The physical mechanism of intelligence is thus enfeebled and the entire mental life undergoes a lowering of capacity, which reflects itself in less efficient or less productive work.

Fatigue manifests itself by the following signs: a sense of fullness in the head or a frontal or occipital headache, a sense of disquietude with a need to move, wandering of attention, gradual diminution of the power to penetrate into the subject of study, decrease of the selective power of consciousness, and diminution of the fixation power of memory so that recollection becomes evanescent and inaccurate. As soon as some or all of

these symptoms appear, mental work should cease and the mind should be distracted.

Cerebral fatigue ("brain fag") causes us to perceive obstacles as painful and insuperable, and is thus the real cause of pessimism, in the greater number of cases. It is as if our fancy were enwrapped by fog, thoughts follow each other slowly and monotonously, imagination is niggardly, conceptions are poor, the vocabulary reduced, recollections difficult, enthusiasms pallid, and the will does not function.

Fatigue leads easily into other states of worry, anxiety, and fear. We must distinguish clearly between normal and abnormal fears. Fear is a perfectly normal emotional state. When we are rationally afraid, we are conscious of the particular object of our fear, and we may meet the situation with courage. Irrational fear is when we allow fear so to control our thought and action that it inhibits our normal response to the situation. The everyday fears which vex so many people are the outcome of this inability to bring thought and action to bear upon the situation; as, for example, in the fear of insomnia, fear of traffic, the fear that transforms every ache and pain into a disease, etc. These are morbid fears.

The abnormal fears are characterized by their intense and irrepressible but unreasonable nature. They may be general or specific in their reference. General fear is sometimes called "panophobia"; it is fear without any particular object as in apprehensive and anxious states. Such general fear may later become attached to a particular object or idea, and then it becomes a specific fear.

The specific fears are usually called phobias. Such fears may pertain to almost any object or situation, but

certain phobias are relatively common. A few of these are mentioned by way of illustration. Acrophobia is fear of high places, like tops of buildings or cliffs. Agoraphobia is fear of open spaces; for instance, fear of crossing streets or open parks. Claustrophobia is fear of being in a closed space, such as a small room, with the door closed. Misophobia is fear of dirt or contamination. This phobia may really be abnormal disgust rather than fear. The afflicted subject may spend a great part of his time washing his hands or trying in various ways to keep clean. Some other relatively common phobias are: fear of blushing, fear of blood, fear of solitude, fear of anything new and unfamiliar, fear of crowds, fear of having committed an unpardonable sin, and even fear of being afraid. In fact, fears may become attached to almost any conceivable object.

"Anxiety is the neurotic sister of fear," says Stekel. In anxiety we are unconscious of the real objects of our fear, and the emotion may be placed upon objects which have nothing in them to excite fear, or have no relation to the real object of our fear. Anxiety is a morbid condition arising from some danger to the self; but the real object of the fear or anxiety may be hidden from consciousness; it may be some repressed thought or desire. It is probable that all "phobias" begin as generalized states of anxiety and become attached to specific objects later.

There are three quite definite trends which have changed the conceptions of mental illness and also the methods of mental therapy.

A. The very great change in the treatment of mental cases shown in the change of the name from "insane

asylums" to "mental hospitals," and the realization that these hospitals are places for cures, and not simply places of confinement for hopelessly deranged people. To really understand these changes and also know the advance which has been made in modern psychiatric methods, everyone should know the recent history of mental treatment written by Albert Deutsch.

B. There is the change in the conception of mental disease due to the work of Hart, McAfee, and White. Instead of insanity being thought of as a distinct disease entity attacking the personality from without, the conception of today is that the phenomena of insanity are the result of definite psychological causes operating in accordance with definite psychological laws. This psychology of mental diseases as the end results of mental stress, strain, and shock gives the therapist an opportunity to be of service in guarding and preventing many nervous and mental breakdowns.

C. At the present moment there is much public interest in the accounts of recovery from mental breaks. This movement began with Clifford Beers, who, after being in a mental hospital for three years, recovered and recounted his experiences in the book, *A Mind That Found Itself*. Within the last two years there have been several accounts of recovery from different types of mental troubles written by Boisen, Seabrook, Brown, and Collins, and even made the basis of a semifictitious record in *Outward Room*, by Brand. While these works are not of very great value as scientific psychiatric material, they give an account and an insight into the working of asylums and hospitals which no scientific manual could give, and through them the man on the street is



as familiar with the procedure of these hospitals as he is with the methods of the general hospital. On this account the therapist should familiarize himself with one or more of the autobiographies in order to create a sympathetic understanding for those afflicted with mental illness.

Mental maladjustment is becoming a distinct problem. The number of new patients admitted to state institutions is very alarming. Strecker and Ebaugh summarize the situation thus: "It is known that 50,000 new patients are admitted annually to the state institutions for the insane. When one takes into consideration the many patients who never reach public hospitals (being cared for privately), and, further, the numerous psychopathological border-line conditions, such as psychoneuroses, which are often just as serious and disabling in their consequences as the psychoses, yet do not require institutional care, it becomes clear that mental disease constitutes a serious and far-reaching economic problem."

The evidence of the figures shows that mental disease is still increasing. In 1910 the state hospitals were giving custodial care to 187,791 patients; in 1920, there were 232,680 patients in these institutions, and the 1927 census shows that the numbers are growing steadily. In 1910 the number of state hospital patients per 100,000 of the general population was 204.2; in 1918 it was 217.5; in 1920 it was 220.1; in 1923 it was 218.5; and in 1927 it was 226.9. Thus, in 1935, according to the Federal Census Bureau, 101,462 new cases were admitted to the mental hospitals of the country, while 77 per cent went to the state hospitals. The total number of patients

on the books of the hospital was 466,045, in 472 public and private hospitals.

Pitkin declares there are 10,000,000 people in the United States who are mentally or emotionally unstable. Sadler states that every year 70,000 break mentally, while ten times that number bend into abnormal mental conditions. Of these, 20 per cent do not feel biologically sound, 30 per cent feel neurotic pressure, while 50 per cent have distinct neurotic complications. Of the 700,000, at least 500,000 could be kept useful and happy by proper mental hygiene and care. McCafferer states that for each person who is actually mentally deranged there are at least ten who are blindly groping in that dreaded No-Man's Land between reality and unreality or sanity and insanity; sick, cross, cruel, queer, prejudiced, or incompetent.

The Council for the Clinical Training of Theological Students was formed in order that theological students might have opportunity during their training to spend at least three months as internes in mental hospitals. While the necessity is recognized of having counselors trained to some extent in mental therapy, it is, of course, practically impossible for any large number of men to go through such an interneship. Experience with students who have acted as internes shows that some, by their interneship, have had their interests diverted from their regular work, others have suffered emotional shocks from which they have found it hard to recover. The work in these hospitals is commended only to those who expect to specialize in mental illness and only to these when they have a well-knit and solid emotional makeup.

In the course of any city work a religious counselor

will meet some cases of mental illness, and in hospitalizing them and in regular visits to those who are in mental hospitals he will be forced into some practical knowledge of mental illness. A short description of types of mental troubles will be of aid for such work.

A word is inserted here to insist that this psychiatric outline is given only for the general information of the adviser and that he should never himself attempt a mental diagnosis. Mental illness is so involved and intricate a matter that only after long observation can a psychiatrist finally decide how the trouble is to be classified, as the symptoms cross and recross boundary lines and the same symptoms may be found in many different types of illness, and in the last analysis they may be only symptoms of some deep underlying cause which lies entirely out of the province and knowledge of the spiritual counselor.

Mental diseases are classified by the American Psychiatric Association into two general classes: the psychoses and the psychoneuroses and neuroses. The psychoses are the more serious major mental diseases. They are usually insane in the legal sense and can be committed to a mental hospital. Many are organic, and alterations of the nervous system are found in autopsies. Many psychoses are not organic and are held to be functional, as for illustration, the manic-depressive psychoses are not clearly organic.

The neurological differentiation of organic from functional diseases is that in the organic diseases the neurons (nerve cells) are either temporarily or permanently destroyed, while in the functional diseases the neurons fail to function. Among the clearly organic

cases are two types which might be called social diseases. The first is the general paralysis of the insane (G. P. I.), due to syphilis—the cerebrospinal fluid gives a positive Wassermann reaction in 100 per cent of cases (Neustatter). The paresis may take on any mental symptoms—elation, deterioration—but usually a period of five to twenty years elapses from the time of primary infection to the onset of general paresis.

Treatment in the primary stages is now considered to produce a permanent cure. Under a thorough treatment by a skilled physician the infectiousness of the disease disappears in a relatively short time, but the malady may linger on so that the patient should have himself examined at intervals. It is estimated that there are 6,500,000 cases of syphilis in the United States, and that 1,000,000 potential mothers have this disease (Yarrow). There is a gradual decline in cases admitted to state hospitals in New York state from 9.1 per 100,000 of population in 1918 to 7.0 in 1935. With marriage laws in many states requiring a physical examination, the large number of public clinics instituted for treatment, and with the government injecting \$5,000,000 next year and \$7,000,000 in 1940 to exterminate the germs which cause syphilis (*Treponema pallidum*), gonorrhea (*Neisseria gonorrhoeae*), and the third but least harmful of the major venereal diseases, chancroid (*Hemophilus ducreyi*), a continuous decline may be expected until this fifth plague is finally eliminated.

The organic mental disease most widely known is the alcoholic psychosis due to excessive use of alcohol. There are three types: chronic alcoholism, with mental deterioration; chronic, without deterioration; and alco-



holism, with hallucinosis, including delirium tremens (D. T.). The latter types clear up, but the cases of mental deterioration evidenced by delusions of marital infidelity, of persecution or grandeur do not as a rule recover and should be hospitalized. The rate of admissions to New York state hospitals declined from 1917 to a low point in 1920, rose until 1927, and from 1933 to the present there has been an upward trend. Any social measures which would cause a decline in excessive drinking would decrease the alcoholic psychosis.

There are types of psychosis which occur in later life. Senile psychosis develops gradually, and is characterized by forgetfulness, defects in orientation, interference in attention, concentration and thinking, self-centering, irritability and a tendency to reminiscences and fabrications. All of these are the natural process of senescence. A presenile type is an early senile deterioration which leads rapidly to deep dementia.

Psychosis with cerebral arteriosclerosis is also connected with age. The clinical symptoms, both mental and physical, are varied, depending in the first place on the distribution and severity of the vascular cerebral disease and probably to some extent on the mental makeup of the person. Cerebral physical symptoms—headaches, dizziness, fainting attacks, etc.—are nearly always present, and usually signs of focal brain disease appear sooner or later (aphasia, paralysis, etc.).

The most important mental symptoms (particularly if the arteriosclerotic disease is diffuse) are impairment of mental attention, that is, interference with the capacity to think quickly and accurately, to concentrate and to fix the attention; fatigability and lack of emo-

tional control (alternate weeping and laughing). Often a tendency of irritability is marked, the retention is impaired and with it there is more or less general defect of memory, especially in the advanced states of the disease, or after some large destructive lesion occurs. Psychotic symptoms may appear in the form of depression (often of the anxious type), suspicions or paranoid ideas, or episodes of marked confusion.

Of the psychoses which are not clearly organic, dementia praecox is the most prevalent. This is the largest problem with which mental hospitals have to deal. One fifth of all the admissions and more than one half of the resident hospital patients in New York state are of this type. The origin of this disease is not definitely determined, and no effective means for the prevention of this disorder have been devised. New treatments by prolonged sleep, insulin shock, oxygen inhalation, and other forms of physical therapy have been reported, but the rate of recovery is very low, in 1934 being only in 6 per cent of cases.

Manic-depressive psychosis has a tendency to attack a person several times during a lifetime, and this is the difficulty in the case of such patients. They recover from a single attack and are then completely well, but the attack may recur; it may come again and again in the same form or in its opposite; indeed, we may have mania and melancholia alternating in the same person throughout a period of several years, and when this occurs regularly at brief intervals, we call it "*folie circulaire*," that is to say, a mental disease in which the two phases, mania and melancholia, are constantly alternating, the patient being only completely well for short

periods between. The mental state shows a series of undulations; these patients are always too exalted or too depressed; only where the wave-line, so to speak, intersects the normal level is there a brief period of normal sanity.

Involution melancholia includes the slowly developing depressions of middle life and later years, which come on with worry, insomnia, uneasiness, anxiety, and agitation. The physical causes are: The period of menopause or the beginning of the senile age period; atrophy of glands—uterus, ovary, prostate, testicle, thyroid, adrenals. There may be marked exciting causes—emotional shocks, mental stress, depressions of middle life, insomnia, agitation. Through a failure of repressions or compensations, the complex handled well earlier cannot now be met. White says, "Every case of melancholia should be considered a potential suicide." Schou warns that suicide is one of the greatest perils that threaten these patients. This should always be borne in mind; and these patients should, therefore, always, without exception, be placed in an asylum. These two statements should be borne in mind by all psychotherapists who undertake the legal responsibility of treating even mild cases.

Paranoia or paranoid conditions show fixed suspicions, persecutory delusions, dominant ideas or grandiose trends, logically elaborated and with due regard for reality, once a false interpretation or premise has been accepted. Further characteristics are formally correct conduct, adequate emotional reactions, clearness and coherence of the train of thought outside the delusional systems.

Special attention should be paid to the statement that after the false premise or interpretation has been accepted, the mind seems to work otherwise as a normal mind. The patient may be an able architect, may be a fairly competent mathematician, may be a good business organizer, manifesting rather exceptional ability to think and to think well, apart from the subject matter of the delusion.

All the above-mentioned classes of mental diseases are denominated psychoses and are differentiated from the psychoneuroses and neuroses. Concerning the exact difference between the psychoses and the neuroses there is a division of opinion. Some psychiatrists, following the earlier neurological school, state that the neuroses are also organic and that psychotherapists treat only the "symptoms" and not the disease. On the other hand, some therapists, especially the psychoanalytical school, claim to have succeeded in relieving some psychoses and insist that in the neuroses medical therapy only defers the cure. Dr. Wm. A. White distinguishes by saying that in neuroses there is an intrapsychic conflict, where the difficulties remain intrapsychic and the perception of the outer world is not disturbed; whereas in the psychoses the difficulty is between the psyche and the outer world with a resulting distortion of the outer world. In the neuroses the conflict is between the ego and the instinctive needs of the individuals, while in the psychoses it is between the ego and the outer world.

The psychoneuroses and neuroses are the only types in which the adviser may be able to be of assistance, when the psychiatrist, in his therapy, asks for the aid, moral or spiritual, of the spiritual counselor. The best



known is hysteria. It is customary to include within its definition very slight disturbances of normal functioning and all gradations away from these to such conspicuously abnormal conditions as multiple personalities. Hysteria is defined as having no symptom which cannot be produced by suggestion and removed by persuasion. Janet defines it as mental depression, retraction of the field of consciousness and the tendency to dissociation; loose organization with faulty synthesis of personality. Freud attributes hysteria to buried sexual complexes when the affect of the complex is converted into psychological symptoms.

The symptoms most generally occurring are parathesias (sensations incorrectly reported), anathesias (lack of sensations), twitches, spasms, convulsions, faintings, amnesia (loss of memory), flights from reality, and fugues. Fugues are dissociations of personality in which the person may do purposeful acts, without a subsequent memory, such as persons who suddenly disappear and come to themselves in a distant place.

The mental stresses of life are an outstanding cause of hysteria. Again and again one reads of the death of a relative or loved one as being a most conspicuous factor in the production of the particular hysteria. Disappointments in love, desertions, seductions, the presence of apparently insuperable obstacles to the fulfillment of love—all of the love tragedies of life are to be found in the history of hysterical cases. Strained marital relations and domestic infelicities of many kinds are often contributory, if not exciting causes. The disappointments of life, the thwarted hopes and ambitions, business cares and worries of multitudinous forms, undesired and

irksome responsibilities, fears for the health of the self or of loved ones—all these and many more are the sort of experiences of life which often end in hysteria or lead to more serious mental illnesses.

The outstanding symptom of neurasthenia is the feeling of fatigue. Sleep fails to remove this symptom, and the patient may feel more tired on rising than when he went to bed. He magnifies the little pains and aches and the minor difficulties of everyday life. This symptom is no doubt closely related to the increased fatigability. The slightest effort, or sometimes apparently the thought of exerting effort, fatigues. There is no anesthesia but often hyperesthesia. Reactions are nervous and quick. There may be insomnia, and headache, and indigestion and other symptoms. Loss of memory is often mentioned, but quite as often it is observed, and properly, that the fatigue condition prevents adequate attention and so the amnesia is apparent rather than actual. Emotional depression is not uncommon. Where the cause is definitely overwork, some exhausting illness, justifiable anxiety or the like, it becomes a purely medical problem and of little psychological significance. The neurasthenic worries about his business and about his family, but particularly about his health. This form of worry is called hypochondria.

Psychasthenia is the end result of conditions which are present in neurasthenia. It is a lowering of psychical tension, giving a feeling of inferiority and a certain deficiency in the perception of reality. The world of reality seems strange, unknowable and in times of strain, terrible, as though it would close in on him and crush him, causing states of fear and anguish. At times there

is inaccuracy of thinking, expressing itself in extreme mysticism in art or literature.

The symptoms are: Emotionally, all forms of phobias or pathological fears, of heights, thunder, crowds, etc., which come suddenly upon the patient and overcome him with trembling and palsy, although he knows there is no reason for fear and he understands its morbid character. There may be morbid desires causing a feeling of restlessness and leading to dipsomania or the use of drugs. There may be obsessions, leading to manias: kleptomania (stealing), pyromania (setting fires), and anthomania (a passion for flowers).

In closing the matter of mental maladjustments it is to be noted again that the outline here given is rather a guard than a guide, a protection to the spiritual adviser from trespassing on the field of the psychiatrist or neurologist.

It is with great caution that anyone approaches the question as to what is normal in adult religious living. Modes of life which are held as ideal in one religious society are considered morbid by another organized group, and this applies to almost all sides of religious living. We find in some groups emphasis on independence and individuality in thinking; in other forms, complete subservience of the mind and obedience to authority. Emotional expressions which are encouraged by certain church bodies are regarded as abnormal by other bodies. The relation of religious living and morality are differently viewed by dissenting groups, one insisting on observance of form and ritual and another on purely moral living without relation to formal rites or ceremonies.

Nevertheless, it seems possible to indicate certain maladjustments which would be abnormal in all groups.

1. An absolute lack of any adjustment whatever to Ultimate Reality. A life lived as the haphazard outcome of different drives and their momentary urgency. A superior court judge in a certain city condemned a particularly vicious murderer to death, remarking, "You are not really living a human life, you are simply vegetating."

2. The "magical" adjustment, in which the person performs certain magical rites by means of which he seeks to compel the God to perform the will of the one worshipping. Sublimations of this primitive magic are found still operative in certain undeveloped groups and individuals. The play "Hell Bent for Heaven" and the novel *Heaven's My Destination* are dramatic delineations of this type.

3. The "flight from reality" form, which is the outcome of phantasy, wishful thinking, and the unwillingness to face the facts or the "God of things as they are." This flight may be mental, emotional, or moral, but results always in maladjustments, fanaticism, and sometimes in psychopathic delusions.

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BOOK IV  
READJUSTMENT





## CHAPTER I

### MEDICAL AND SOCIAL AGENCIES

**R**EADJUSTMENT is the effort made by which those who have failed to adjust themselves, either from internal or external causes, are led into new ways of acting, feeling, and thinking, and thus they find, as far as possible, outlets for their energy and satisfaction for the needs of their lives. As the physical is basal the first consideration must be medical. A physician is a person with the degree of doctor of medicine engaged in the general treatment of disease for the purpose of cure. On the basis of a degree in medicine most physicians, especially in the city, specialize in some particular branch of medicine, with special titles, such as pediatrician, practologist, etc.

The range of medical treatment in maladjustments is very greatly enlarged by recent research and discovery. With children, the surgeon can almost transform the malformed child into nearly normal physique, and by vocational training avoid frustrated personalities. Glandular treatment, beginning early, prevents many abnormalities. Certain advances which give the physician new remedies are: the use of insulin in undernourishment, hormones for sexual disorders, thyroxin, in nervous disorders, pyrexial (artificial fever) treatment, and insulin shocks in the psychoses.

Neurology is the examination of the nervous system to discover pathological conditions of the nerves or brain. It makes tests for motor paralyses, tremors and ataxias;

it tests the reflexes and examines the cranial nerves. The examination includes sensation in the face, trunk, and extremities; the cerebrum in relation to speech, and the vasomotor nerve action. A competent neurologist ought to be able to locate any true organic pathological condition of the body.

Psychiatry is somewhat analogous to other medical specialties and is an applied science or an art, whose final object is the diagnosis and treatment of mental patients. It is broader than psychology. It includes the physical and mental symptomatology of mental defects and diseases, their etiology, their pathological anatomy, and any other scientific knowledge that can be applied to their diagnosis and therapy. It also includes the highly important subject of the institutional care of mental patients.

The psychiatric study demands a thorough physical as well as a complete mental examination. In addition to the ordinary medical examination, which means the heart, lungs, etc., the various neurological tests are made, and clinical sights of glandular imbalance are taken into account. A serological examination is also indispensable. This means simply that a blood Wassermann test must be performed (and if necessary a spinal fluid examination made) to rule out the possibility of syphilitic infection as a cause of abnormal conduct. Metabolism studies (in cases which show signs of glandular disturbance), X-rays, and other laboratory aids to medical diagnosis are called into assistance whenever the superficial physical examination indicates the desirability for such procedure. The mental examination consists of the usual psychiatric observation for hallucinations, delusions,

disorientation for time or place, and other symptoms of mental disorder. It also includes a study of the mental life, with more or less utilization of psychoanalytic principles, with a view to revealing any possible emotional conflicts, obsessive ideation, etc.

The psychological study of the aberrant person is equally thorough in nature. It includes examinations for the determination of the general level of intelligence (such as the Stanford-Binet or the Army Alpha), and all sorts of tests for the establishment of the existence of special abilities or disabilities. The data of the psychological study should offer not only an estimate of the individual's intelligence, which may be a contributory factor in the production of his misconduct, but also a picture of his potentialities for achievement, since the sublimation (redirection) of energies once used along antisocial lines into vocational, or other socially approved activities, is often an important step in the adjustment of the individual's behavior and the correction of his difficulties.

The sociological study should give an account of the hereditary and environmental influences which have been brought to bear on the personality development of the individual.

The requirements for psychiatrists and neurologists are, in addition to the M. D. degree and one year general internship, a special period of three years study in approved institutions, of which eighteen months shall be a special internship in hospitals, clinics, and laboratories.

Psychotherapy, based on psychology and psychopathology, comprises all the various mental and psychological

methods of treatment of both mental and physical disorders. This includes all the work of psychologists in mental therapy and the use of psychoanalysis, which, being so often misunderstood, must be clearly stated.

The act of purposefully but unwittingly relegating ideas to the unconscious is what is termed "repression," the repressing force being the censor. The material repressed is formed of those thoughts, memories, and wishes that might prove distasteful to their owner, who thus tries to disown those aspects of his mental makeup that would be too painful to recognize. The repressed material has its psychic value and remains a dynamic factor, especially when connected with some emotional effect which has never been expressed. As a result, a state of conflict is established between the repressing censor and the repressed trend. This conflict may have various results: the ethical tendencies are ignored, the person becomes antiethical and perversion results; the repressed may split off and give dissociation of personality; sublimation may direct to new and higher goals; the material is expressed in distorted and disguised ways, the symptoms may be mental or bodily; reaction formation, a conscious trend, is overaccented to cover up an exactly opposite tendency shown in errors, slips of tongue, etc.

The selection of dreams is guided by the repressed material, and are symbolic of hidden wishes, dramatization of wishes, and displacements. In a child there is an instinctive system, and one for adapting to surroundings, the mental and rational. This part that controls is the "ego." The instinctive energy in the "id" is the "*libido*," and this is sexual. Sex means those trends once



sexual, now diverted, such as all the various manifestations of parental instinct, love, and hate, and everything that will secure a relation between sexes. All is sex.

The censor is not a part of the ego but it is a special portion of the psyche, developed in the unconscious, that has been called the "super-ego." The shifting of ego-libido to outer objects is one form of what has been called "transference." Fixation is when libido sticks to infantile aims. Fixation in the autoerotic stage is dementia praecox. Fixation at narcissistic stage is manic depressive.

The technique of psychoanalysis is the analysis of dreams, free association, transfer, the catharsis, and re-education. Franz Alexander, president of the American Psychoanalytic Association, which, by the way, now requires an M. D. degree for membership, states very clearly the limits of psychoanalysis. The method is not successful after the age of fifty; low intelligence, as that of a moron, is a barrier, and the presence of hallucinations or delusions prevents an analysis. The cost of an analysis is almost prohibitive. A prominent analyst requires four one-hour treatments a week for six months to two years at five dollars a treatment, paid for in advance. Menninger estimates the cost of a complete course at fifteen hundred dollars and "Fortune" gives the cost "from two thousand to thirteen thousand dollars, or more."

Shaffer quotes the results of Kessel and Hyman in thirty-three cases sent by them to psychoanalysts as follows: specific cures by psychoanalysis, five cases; patients helped but not cured, five cases; minor behavior problems remedied without use of psychoanalytic techniques,

three cases; cured, but probably by environmental changes, six cases; not cured, conditions relatively unchanged, seven cases; not cured, developed serious mental disorder during treatment, six cases; suicide during treatment, one case.

The psychoanalytic clinic of Berlin gives the following results: 604 cases were treated, the treatments lasting from six months to several years; 363 treatments were completed, 47 of these were "unhealed," 117 improved, 88 much improved, 111 cured. In its strictest sense, psychoanalysis must follow the technique of Freud, but variations were made by Adler, who relegated sexuality to the background and used the "masculine protest" and the "will to power." Jung, in his theory of types, derived, but deviated from Freud. In this country, Franz Alexander is the leader of the strict Freudians, while Paul Schilder, Karen Horney, and English and Pearson develop systems of psychotherapy based on Freud.

Re-education for the psychoanalyst means the restoration of the integrity of the individual, and he has no moral standards, he seeks not to influence the moral judgments of the individual. Any spiritual counselor should definitely make it known that he does not use the methods of psychoanalysis in his work. There is a limited field of psychological understanding in which an adviser may work, but it should be definitely limited.

Social agencies and religious work have a most intimate connection. The question may normally be raised at this point: Why study individual readjustments when so many maladjustments result from external environmental pressures? The answer is to be found in the fact that the individual and society are one, there is no "hu-

manity" in the abstract, only human beings. The regeneration of individuals and of society is one problem. To use a figure from Doctor Fosdick, "The Holland tunnel is a two-way tunnel—it runs from New York City to Newark, and also from Newark to New York City." Religious reconstruction is also two-way. All real religious experience expresses itself in service to fellow men in regenerating society, but there is no regeneration of society except by personalities which are themselves transformed from selfish, sexual, and egocentric lives into socialized beings, and in the immediate horizon there seems to be no power which can do this except the realized ideals of Jesus Christ, transforming and transmuting men into Christlikeness.

It should be noted that the counselor should have a working knowledge of sociology, especially of social pathology, in order to realize how large a percentage of the disasters in life come from purely external causes, over which the afflicted one has no control and for which he is not responsible. There is a very large field in which the Christian worker must be intensely active in bringing to bear the principles of the Christian religion on organized groups in society. But, important as this work is, it lies without the scope of this text. To come at all within the bounds of one volume we must content ourselves with the methods of producing individual lives governed in all their activities with and by the Spirit of Christ. The work of these transformed lives in transforming society is, as Kipling says, "another story."

It is to be noted that there is a very decided increase in the use of psychiatry in the clinics of social workers. The question is now being forced upon social workers

as to how many of those asking for help are physically or mentally subnormal or decidedly abnormal, and whether their inability to care for themselves is due to their defects. The well-organized clinic now has the services of a psychiatrist, and even of a psychoanalyst, and all workers are given training in the principles of psychiatry. In relation to cases of need there is hope that the old-age, unemployment, and social security insurance will alleviate much of the poverty now so evident. As these measures will not, however, take effect immediately there is an *ad interim* necessity for relief work.



## CHAPTER II

### RELIGIOUS READJUSTMENT IN THE CHURCH AND HOME

THE nearest approach to social agencies is through a church clinic. Many churches have established clinics in which the psychiatrist, the social worker, and the pastor have joined their efforts in helping.

These church clinics soon discovered the necessity for certain safeguards of common sense in determining procedure. The basic assumptions which were accepted quite generally may be reduced to three: First, it was assumed that the church clinics were dealing only with diseases which were functional, not organic, and which were largely of psychic origin; second, it was assumed that those suffering from these nervous, functional disorders should have the best medical counsel available, not only for thorough physical diagnosis, but also for such medical and surgical treatment as was indicated; third, it was assumed that the counselor would refuse to handle any case unless it was referred to him by the physician in charge, or in co-operation with a physician, if the patient appealed first to the church clinic and was then referred to the physician.

The *raison d'être* of the church clinic was, and is, the healing of souls. The very famous Immanuel Movement of Worcester and McComb in Boston was controlled entirely by its relation to the medical co-operation.

Perhaps the best deliverance on the matter of the heal-

ing ministry is the report of the committee appointed by the Lambeth conference.

The committee stated that "As a result of our deliberations we laid down certain general principles."

The chief work of the Church in regard to disease is to develop in all its members a right attitude of confidence, love, and understanding toward God, and to train them to approach all questions of disease both for themselves and for others in this spirit; to bring together those who care for the soul and those who care for the body in co-operation; and to insist on hygiene and plain living as part of the ordinance of God.

The Church must sanction methods of religious treatment of bodily disease, but in doing so must give full weight to the scientific discoveries of those who are investigating the interrelation of spirit, mind, and body.

It is not the function of the Church to apply its means of restoration if no higher end is sought than the recovery of bodily health. Indeed, to do this would gravely compromise the meaning and purpose of the Church's rites and sacraments. No sick person must look to the clergyman to do what it is the physician's or surgeon's duty to do.

Whatever the means employed by the Church, emphasis should be laid upon the primary purpose of deepening the sense of fellowship with God secured for us in Jesus Christ. Whether the sick person throw off sickness or not, the work of the Church will have been effective if he has thereby found truer peace of spirit and a more real knowledge of the uplifting presence and power of Christ. While offering some suggestions as to a form of the ministry of healing to be used, the committee holds

that licensing of individual healers or the official recognition of healing societies by ecclesiastical authority is unnecessary and at present impracticable.

Another step in religious counseling is through group discussions.

The teacher should be a man who can produce in the group a sense of confidence and reliance upon himself.

The teacher may use the authoritative method; that is, draw from his experiences and his study material, which can be used to give directions and decide what must be done in cases. He should be willing and able to answer all questions which his statements arouse.

He may use the panel method, in which the counselor acts as a presiding officer and is assisted by persons who are authorities in their lines and to whom particular questions pertinent to their specialties are referred.

The modified technique of using a teaching method to begin with to give the group members confidence and to prevent disastrous sidetracking, and then begin a process of giving responsibility gradually to the members of the group themselves. This is especially desirable in dealing with high-school and college groups.

Certain things can be done in group teaching for an individual as a functioning member of a group which cannot be done in private. The group approach to problems is open and aboveboard, without emotional fixation of the patient on the counselor, or vice versa, and is sometimes more wholesome. This type of group work is good preparation for personal individual work when the opportunity arrives.

Group discussions can be formed on almost any line of effort, perhaps using a textbook, but should not be

forced. There must be suggestion and a wish on the part of persons interested if the group is to succeed.

The most popular methods at present are the University of Life groups on Sunday evening for high-school students and youth, in which someone competent in his field lectures and leads discussions on the many problems of youth; Sunday-evening groups for religious exchange of experience and thought, after the manner of the Oxford Group; weeknight study classes of religious problems. All these educational methods assist in orienting the individual, or in giving advice which may prevent later disasters.

Problem preaching, if the counselor is a preacher, will probably be the first and best approach to his people. This preaching gives people confidence in his understanding and sympathy with them in the problems which confront them. Problem preaching breaks the ice between him and individuals in the congregations. When he touches upon their particular problem, their interest becomes intense and opens the way to a conversation upon intimate matters.

At the door a young man may say, "Pastor, there are some things in your sermon I would like to talk over with you."

The pastor replies, "I shall be very glad to have you come to see me, at such and such a time."

Or, some very timid boy or girl with just a hint of wishfulness, may write the pastor. They should be invited to come and talk over their problems. This preaching may articulate in their minds the trouble which has been indistinct or unrecognized and thus enable them to see and solve their own problems.



The value of this type of preaching depends on the preacher's knowledge of human life. Fosdick says: "That he should know his gospel goes without saying, but he may know it ever so well and yet fail to get within reaching distance of anybody unless he intimately understands people, and cares more than he cares for anything else what is happening inside of them. Preaching is wrestling with individuals over questions of life and death, and until that idea of it commands a preacher's mind and method, eloquence will avail him little and theology not at all."

The outline of a problem sermon should be as follows: A clear-cut statement of the problems, distinctly articulated; the history of the problem—what are the motives, causes, drives, how we got here; the solution to bring such information from study, experience, and revelation as will lead to a way out, re-enforcing faith, encouraging the soul by direction of the spiritual life. This follows the method of the physician: Diagnosis from symptoms; history of the case; prognosis; and the prescription or method of recovery.

The preaching must cover as wide a range of problems as possible. There should be a balanced program of preaching, and not harping on one particular line of thought.

The sermon must have in it an emotive urge, not only the intellectual solution in harmony with the reason, but must have a drive toward putting the solution into actual practice in life. This is best accomplished by the power of imagery, nicety of illustration, and specific examples.

The problem must be so simple and general that many

persons will be helped by its solution, but care must be exercised that problems will be proposed to a highly suggestible audience which will be accepted by the individual as his own—"Come to think about it, that is just my problem." The problem must be clearly within the range of the speaker's education, age, and experience. The acquirement of "wisdom about actual life" is a rather slow process, and any attempt clearly beyond the range of the speaker only creates absurdity. For illustration—the bachelor's sermon on "How to Raise Children."

It is in the home that the spiritual counselor finds opportunity to aid and advise. He must clearly distinguish in his mind between his ministry to the home as a shepherd of Christ's flock and his work as a technical counselor. As a Christian minister his opportunity is, as of old, to bring the salutation, "Peace be upon this house," and that peace is in realization of long-suffering, meekness, gentleness, love, and bearing one another's burdens.

Before offering any advice to the home, every sensible person will sense the home atmosphere of the people whom he is striving to serve. On the theoretical side he should know such studies of the home as that of Fiske and Westermarck. Further, he should be definitely aware of the difference in character between city apartment-house life, and rural or semirural homes. The conventional ways of certain strata of city life, which seem perfectly normal to them, must be met without shock.

As a counselor the pastor should consider every home in which he enters as a place where he may observe situa-

tions; and if they seek help, he attempts to make adjustments. However, he is not to consider that he is to offer unsolicited advice on every occasion for every difficulty. If he finds that some condition has arisen which is causing trouble, and indirect suggestions bring no response on the part of the persons involved, he had better refrain from offering advice.

Parent and child relations offer opportunities for helpfulness. There may be friction between parents and children caused by an authority complex on the part of father or mother in conflict with revolt against control by the child. There is probably always some friction between the two generations, but in some Old World families, where the parents are European in their ideas and the children are "free American" in their ideas, this conflict becomes tragic. The pastor may suggest to the parents the need of development of personality in the child through giving him definite tasks and putting on him some responsibility.

Much more important is the tension caused between the two generations by the revolt against "Puritanism" or conventional morality on the part of youth. In all parts of life, intellectual and political, adolescent life rejects the old and traditional, but especially in the field of morals this revolution is most marked. To realize the extent of this change one should study the factual statement of Davis, visit the beaches and the movies, or read the sex literature and pornographic publications of the day. Without entering into a discussion as to the comparative theoretical morality or actual results of the contrasting views, certain considerations may be urged upon parents by suggesting to youth the value

of experience and independence as a part of character training. If necessary, youth must learn by burning its fingers in the fire. Boris Sokloff says: "The intellect is a great deal more active between the ages of forty and seventy than in youth, . . . as long as the intellect remains limited in its rôle of technical adviser, it is indispensable. But when it begins to interfere with the domain of human relationships and tries to build a state or a family on the basis of its dictatorship, the enterprise will inevitably fail, because it brings with it conflicts, controversies, struggles, and wars."

The adviser may suggest to parents to recall their own youth and endeavor to see youthful life not with the eyes of age but through the fire and passion of young life.

The home today is assailed on so many sides by adverse influences that its permanence, or even the possibility of its continued existence, is in question. Physically, the continual shifting of apartment-house dwellers from one part of the city to another destroys any permanent attachment to locality. Unknown to neighbors, a family feels no sense of responsibility to anyone. There is a question in many minds as to whether marriage should be permanent, and when the stability of marriage goes, the foundation of the home is shifting sand to be swept away in the currents of modern life.

The basic problem of finances has many angles. All the ills resulting from low-income standards are detrimental, if not destructive, of happy wedlock. A writer in a responsible magazine argues that marriage must be subsidized. In the new earning capacity of women financial incompatibility arises—the wife is a good business woman, husband shiftless or out of a job; wife



tires, seeks and gets release. The rapacious Loan Shark scuttles many a matrimonial venture.

The prevention of these disasters can come only through loyalty "for better or for worse" that will not let the partner down, a frank realistic facing together of what the financial problems will be, and a spartan living within a budget system that balances expenditure with income.

As the family is Mother Nature's way of continuing the human race, many disasters result from the basal urge for reproduction, which is the biological reason for the family's existence. The underlying cause for this wreckage is that for a mass of people, marriage is looked upon as simply the opportunity to give way to this urge, and when satisfaction is not found, the bond of marriage is openly or secretly broken. There are two definite deviations from normality in this drive—the undersexed and the oversexed.

The absence of sexual desire in a woman is called frigidity, and in the larger number of cases the cause is psychological—very often from a strict upbringing in an atmosphere where all mention of sex was taboo, or from a lack of preparation for sex life, or from unfortunate experiences during the honeymoon. There may also be semiphysical causes for lack of response, such as fear of pregnancy and dread of childbirth, medical or physical attempts at abortion, or the organs may be desensitized from the use of too strong contraceptives. Rarely a true homosexual woman marries, which always results in marital unhappiness. Many physicians place the blame for frigidity on the husband's lack of knowledge, or lack of skill in nuptial approach, resulting in a

continued frustration of desire on the part of the wife which eventually kills desire itself.

The deficiencies on the man's part may be sterility, inability to fertilize the female ovum, or impotence—inability to have sexual intercourse. Impotence may be physiological or psychological. Physical impotence may be due to organic nervous diseases, to diabetes, or other physical ailments. Psychological impotence has various originations. A man may be impotent with his wife and yet potent with other women. Steckel says, "When a man comes into the office and complains of being impotent with his wife, the first thing is to find out what kind of a secretary he has." No man can serve two masters here, for extramarital adventures destroy the home life of loving desire. Strong moral inhibitions prevent promiscuous sexual adventures. Block says that a degree of intoxication is necessary for most men before commercial intercourse becomes physically possible.

The oversexed type is most common among men. Every physician, and almost every pastoral counselor, knows of the experiences of women who are the victims of oversexed men. The continual demands made in season and out, and the degenerate sexual practices of men, which appear in divorce charges of the man's having "destroyed the health" of the wife seeking freedom, are all evidences of this abnormal drive. A long experience in listening to these sad stories discloses that such abnormalities are by no means confined to the uncultured, but are more common in studied refinements among the supposedly better classes of society.

The most important matter in sex hygiene is a knowledge of variations and mutations in the sex drive. The

strongest drive in man is from adolescence on—ages 14 to 18—but ordinarily if a man is married, it runs a natural course of decreasing intensity. From 48 to 58 there is a very great increase in sexual desire in men, probably owing to release from business and more time to divert to sex, and money to spend. From 60 to 65, a very great stimulation is apt to occur if there is enlargement of the prostate gland.

In women, there is a natural flowering and normal development until time of menopause, 45 to 50, then extreme nervousness and a distaste for any sexual suggestions or intercourse, and at the same time extreme jealousy and suspicion of husband. At about forty, unmarried women undergo a period of great sexual strain, seemingly nature's last effort. Many women flower out, change their life, attract husbands and are married at that time. After the menopause, many women are freed from worry of conception and enter into freer sexual intercourse; how long capacity for orgasm lasts no one knows. Many psychologists are noting that the coincidence of sexual frigidity in women during the menopause, coming at the same time as increased sexual desire on the part of men, is the cause of much marital unhappiness and trouble. Robinson and Lawrie, from different standpoints, agree on the seriousness of this complication in married life.

What the counselor can do in aiding marital difficulties of this type is somewhat limited. The approach to these matters is not easily made, and when it is made, the initiative must come from husband and wife for an uninvited intrusion will be resented.

The necessity for examination and advice for young

persons before marriage is being more clearly realized each year. This advice may be obtained by consultation with a physician, or, for the bride, a woman physician, who will make a physical examination. Many marriages are wrecked by physical impediments to natural intercourse, which could be easily remedied by a physician. Where there is a marriage counselor in the church or in some social-service agency, that person may give all the advice necessary concerning intercourse, birth control, and contraceptives. There is a vast amount of literature now published concerning every problem of physical intercourse, some of it is scientific, as the work of Ellis, but much of it is purely pornographic, bought to satisfy sexual curiosity or excite passion. The advice which the counselor may give is rather limited.

Love cannot live on love alone; it must be continually renewed and enlarged by new fuel. If husband and wife have no interests aside from physical, or in their common abode, irritation comes in; lack of understanding and the mental separation lead to a parting of the ways. The higher the level of culture, the more interests in common, the more insurance for the marriage bond. A proper suggestion is finding some mutual interest, adopting a child, or study or travel.

In the case of widely varied intellectual development there is apt to arise a feeling of superiority on the part of the one more highly educated, which is consciously or unconsciously exhibited, producing a depression of self-respect, an "inferiority complex," on the life of the mate. High intellectual development is not guarantee of fidelity, sympathy, or understanding in married life, as is shown by the marital wrecks in the homes of college



professors and even in the life of England's most prominent philosopher.

When the married couple are of decidedly different religious beliefs, as, for illustration, Protestant and Roman Catholic, or Hebrews and Gentiles, only a very broad and liberal type of mind can keep the marriage from the difficulties involved in such different points of view and manner of life. Such a marriage may be successful, but it is not to be entered into "unadvisedly" or without counting the possibilities.

Fatigue and physical exhaustion play an important part in wedded disharmonies. A tired child of four, just before bedtime, is nervous, cross, and irritable. Fatigue lowers the threshold of sensation and emotion, feelings flood in, and at the same time it diminishes the power of inhibition. One comes home from the office mentally fatigued, to the other, worn and nervous from home duties. Irritation arises from lack of understanding; a harsh word is spoken which sets off the emotional fire; both let go their tempers at the same time; words are spoken which are beyond recall, and the home is broken.

The most famous psychiatrist of Los Angeles in speaking of movie divorces said the causes are: infantilisms, temper tantrums, selfishness, jealousies, and all childish manifestations. Seven eighths of all divorces since 1887 were uncontested, showing mutual consent. The best counsel is in trying to get the people definitely to state their troubles, seeing one and then the other, and then bringing them both together for understanding. A judge sometimes is most successful.

The spiritual counselor has a definite ministry to the sick in his parish and among his constituency. He must

understand the psychology of the sickbed, must realize that illness renders people sensitive and occasions a mental change in them.

A man suffering with dyspepsia: A formerly happy, cheerful, sensible, contented person, now suffering pain and discomfort, must observe diet, rest, exercise. He becomes pessimistic, his range of interest is lessened, he turns gloomy, morose, and ill-balanced. This is not a dangerous trouble, but very hard on the nerves. The counselor should realize this when he goes to see him, that he has a sick body and mind, that he is not to be argued with or corrected, but to be suffered.

A man with kidney disease, diabetes, too high or too low blood pressure, or heart trouble, has his psychic state altered; once a robust man, now weak and feeble-tempered, he is irritated by trifles and flares up at the slightest thing. This is a serious physical disease with mental accompaniments.

It will add to the efficiency of the counselor if he has a general knowledge of the more common physical diseases which he will meet with in his pastoral calling. This information as to whether the malady is acute and runs a short course, or whether it be chronic with a long-delayed eventual outcome, gives the counselor background against which he can decide what his spiritual ministrations shall be. It is very doubtful, however, whether detailed knowledge of disease may not lead the pastor into suggestions which may interfere with medical treatment.

In the report of the supervised clinic of the Andover Theological Seminary occurs a part of a student's report, this sentence: "Student assisted patient in using a bed-

pan; students spend one month as regular orderlies on hospital wards." The value of this sort of training, except for a student expecting to be a hospital chaplain, is very much in question. From long experience in hospitals as medical student, patient, pastoral visitor, and on hospital boards, it would seem desirable to keep the atmosphere of prayer quite distinct from the atmosphere of the bedpan.

In visiting the sick the counselor must bring with him an atmosphere of health and vigor. It is doubtful if one should call if ill. Never complain of one's own trouble or ailments. Do not tell of other cases of illness, unless they have recovered. Suggest leaving care and worry to the doctors and family and letting them worry while the patient gets well.

Use a very quiet tone of voice and manner. Make calls so short that there is no mental or nervous strain: "Just dropped in to tell you we are thinking about you and praying for you." In chronic cases call on the same day of the week if possible—it may be the only bright spot in the patient's life. When persons are very ill and weak, they are very suggestible and also keenly aware of the moods of those who care for them. The counselor should maintain an attitude of hope and expectation in the patient, except in positively incurable and rapidly developing diseases. And no one knows positively when a case is incurable.

Worcester says: "It is therefore a matter of the greatest importance to instil into sick persons' minds confident faith and expectation of recovery. In many cases known to me, such faith has sustained very sick persons with courage to continue to battle by strengthening their will

to live. This we proved during our eighteen years of work among tubercular patients.

"... Of course his recovery might have occurred just as it did had he never seen me, but his physicians and his family did not think so. If I played any part in the attainment of this happy result, it was by sustaining his courage."

When the patient is severely sick, even when death is very certain, the counselor is there to help him fight it through. He gives thoughts of the power of God; is cheery, strong, and natural. For a prayer at the end, he may use "Brighter and Brighter Till the Coming of Perfect Day." He kneels by the side of the bed where the patient may hear; is short and brief, and leaves a sense of the presence of the Master.

Where the person is not a Christian and he is asked to come, he generally explains, "They wanted me to drop in, to see if I could be of any help." There is no formality, but he brings the help Christ gives; not fear or reproach, but help in building up the patient.

Assume in your conversation that the patient is going to get well, and direct attention to what he may do when he gets better. The counselor is there as a representative of Christ, as a man of faith and as a man of prayer. A straightforward recognition of this fact will make his sickroom visitation of value.

There is a formidable psychological barrier that impedes or prevents ordinary conversation. The sick person seems to be looking out of a window and but partly conscious of the well-intended talk; the regular formulae of inquiries and greeting do not exactly fit.

The counselor should have a physician's sense of



honor about what he learns in those intimate personal contacts. People will confide in him if he is worthy of their trust. He will carry about locked up in his own breast the secrets of many hearts and of many homes.

It is a breach of etiquette for the counselor to suggest a change in doctors. He may suggest that perhaps the patient might ask his physician if he thought a specialist or a consulting diagnostician ought to be called in. He should be noncommittal if the family says they think the doctor is not doing much good. It is customary to ask the head nurse if he may see the patient. He should learn to walk in hospitals as nurses walk, on toes and not flat-footed. In a general hospital, the counselor is not at liberty to speak to patients other than the one who is his direct charge, unless he be the appointed chaplain of the institution. He is not to use any technical psychotherapeutic methods or techniques unless by the consent and under the direction of the physician in charge. To suggest any medicines to the patient is a breach of courtesy which physicians do not forgive.

There are certain details the counselor should follow when calling on the sick. He should free the patient from any idea that he must be entertained—"Now you just lie quietly there and I will do all the talking." He may open the conversation by asking the nature of the illness, and permit some account of it to be given. He should be a good listener, but take up the conversation and direct it toward the hope and possibility of getting the patient well and strong.

The counselor may bring spiritual consolation and strength by the reading of the Scriptures, or, better, having certain great passages in mind to be repeated—not

too long or too complicated; an informal prayer—"This is Thy child, Father; may he rest in Thee"—words of quiet and peace; or, if spiritual difficulties, promise of peace and pardon. The prayer should be short, very simple, and with no long exhortations—a deep laying-hold of God for His power and strength. Direct attention to helpful autosuggestion on part of patient, in the night repeating promises of peace—"Thou wilt keep him, Thou dost keep me in perfect peace." Scripture mottoes, with messages of cheer and comfort, and a word of peace and quiet, should be given.

Exercise faith in the power of prayer. It is said there is a life principle and a death principle fighting. Certainly, a life principle is fighting; prayer may increase that life principle so that it may conquer the disease. The difference between functional and organic diseases is not clearly known. The power of prayer may set the organ to functioning again.

The question of spiritual healing is so involved and complicated, and the subject of so much debate, that it can be treated here only by analysis into the negative and positive elements which enter into its consideration. The negative elements are indicated by:

a. The fact that many cures of the healing cults and professional healers result disastrously for the patient. The counselor who has occasion to observe many cases of illness either through his own contact with them or from other sources of knowledge, will have many case records of people who have joined healing "cults" or been treated by professional "healers" and after being "cured" have soon died. These cases include cancer, tuberculosis, and many other acute diseases.

b. The fact that all types of psychical therapeutics are subject to the same mistake of treating and curing "symptoms" and leaving the underlying, deep-seated maladies untouched. There may be mental or organic disturbances which are removed by suggestion while the basic organic causes of trouble are not discovered, much less removed. There is the case of a letter from a man who came to the church office for help, in which letter the man inordinately glorifies the counselor for his "miraculous cure" of the man's *tic dolooureux* (facial neuralgia with spasmodic facial twitchings). By a simple enforced suggestion the spasm was removed for some weeks, but before a year the counselor held this same man's hand when he died from the shock of a facial operation.

c. The difficulty is of getting any clear picture of cases, from either the enthusiastic, elated patient or the (perhaps unconsciously exaggerated) reports of the "magnetic," "spiritual," or other "healers." Some knowledge of "conversion hysteria," with its fickle, fluctuating, flickering change of symptoms, throws doubt on the exactness of the diagnosis or the alleged "restoration" in many cases.

d. The evident fact remains that within a certain range of functional and even organic cases, the severity of the symptoms is diminished or disappears, and a change in the mental outlook and feeling tone of the patient is effected for good; however, the puzzling fact confronts that the cause of the cure is attributed to many and vastly different sources. From the witch doctor's "incantation," through "shrines" and "healing cults," down to the "medical underworld" of today an objective consideration reveals the same story of the effect of

"faith," no matter what may be the object on which the faith is fixed.

There are positive elements, such as the scientific studies of the interaction of the emotions and the glandular system, which indicate that mental and emotional states do affect and to some extent determine the functional activity of the body. At present there is debate as to the exact distinction between functional and organic disease, with the trend being slightly in favor of the belief that some diseases, formerly called organic, may be partly functional. This investigation opens the way for a scientific basis for mental therapy, but, as Kipling says, "The story is yet to run."

In the view here held—that religion is a function of the "organism as a whole" in relation to the realm of values and spiritual realities—the interrelations of body, mind, and spirit are so closely interwoven that "nor does body help spirit more than spirit helps body." The bodily coenesthesia is not more important to health and growth than the co-operating unity, sanity, and moral enthusiasm of the spirit.

In establishing the validity of healing directly by the working of the Great Spirit the counselor need not insist on "miraculous intervention" with the ordinary laws of nature, but, rather, suggests a supraphysical adaptation and assimilation of the energy of the Ultimate Reality, in and through whom physical nature has its existence, its explanation, and its final purpose in the development of humanity into Godlikeness.

The determination of the extent to which this spiritual power may be given direction and made energetic must depend on the experience of the counselor. The spir-



itual adviser may not deny the claims of any other rational, consecrated, devout spiritual counselor.

There are infinitely delicate relations with spiritual power which condition the counselor in this field. The adviser may objectively distinguish other psychological effects and yet be definitely persuaded by his experience that through prayer he is able so to condition himself and the patient that life energy may be transmitted to the suffering one for his help and healing.

The service companies advertise, "Light, heat, and power, at your service." In a figure of speech, the counselor is a "transformer" in touch with the infinite energy and "stepping it down" to human life in the light of truth, the warmth of divine love and the divine power that transmutes, transforms, and transfigures imperfect human life into divinity.

The counselor is not at liberty when calling on the sick to use any psychotherapeutic methods without first obtaining the co-operation of the physician in charge. The distinction is to be sharply drawn between spiritual comfort, consolation in prayer, reading the Scriptures, etc., and the use of any healing technique.

## CHAPTER III

### WHAT THE PHYSICIAN TO SOULS CAN DO

THE counselor should have set office hours when people will be free to come and see him. In lieu of an office hour he should have a place where he can ask people to meet him at certain specified times. The office place of consultation should never be where the counselor and patient are alone; never in the church unless a secretary or deaconess is within call and knows of the interview. In the home it is best to have the wife usher in the patient and be in the vicinity, even though out of earshot. He should never go to interview women at public hotels or in disreputable places without taking with him some other man.

A church clinic is not advisable except in large communities, where the church can pay secretaries and secure services of a social worker, a physician, and a psychiatrist. In a place where a church clinic is impossible, the counselor should confine his ministrations to such cases as come within his field.

There is a technique to be followed in the interview. From the physical standpoint, the room should have as little as possible of the "office" air, not too bright light, but soft or subdued. The counselor and the person should be about on an equal height physically when seated, the counselor's chair not much higher or much lower than the patient's. The patient should not be before the desk at which the counselor sits. There should be some light on the patient's face.

It is better if the counselor does not continually look at the patient, but looks away and only turns when asking questions. This enables him to keep his mind on the diagnosis. Unless he has advanced to where he feels competent to treat nervous ailments, he should not have a sofa or couch in the office.

Many a man, no matter how much confidence he places in a person, prefers not to have that person looking into his face while he is talking. To know that he is being noticed reminds a man of himself and makes him self-conscious. If he is seated at the side of his confidant instead of opposite him, this sense of being watched does not become so strong. The idea that an individual is more likely to reveal his secrets when he is in the shadow than when he is in the full light of publicity is confirmed by experience. We want to tell our secrets unobserved even by the person to whom they are being revealed.

The psychology used by the counselor may be as follows:

He must have an easy, relaxed position, an easy, sure approach. Any nervousness destroys confidence of the patient. He must not be in a hurry to see the next person, and must make the patient feel he is welcome to his time. (Always without cost; absolutely, the counselor should never take money for consultation.) He must hold his own mind and heart objectively free from emotions and feelings. There must be no sign of gloom or nervousness.

He must be a good listener, almost entirely passive except when drawing out the patient. He must refrain from comments or remarks or arguments. He should

be able to listen in such a way as to help nervous and timid people through what is for them a difficult task. A man or woman who has come to the point of asking advice is in a state of extreme tension, and the slightest interruption or mishandling will seal their lips so that there can be no confession or help given.

The spiritual adviser must not criticize or give an expression of satisfaction or dissatisfaction. As adviser, he is sympathetic, but as a soul physician he must be coldly objective and face the facts as he finds them, never shocked by immoral conditions and never afraid at the end to state his conclusions. This impersonal detachment is hard to acquire, but is absolutely necessary.

There must be an atmosphere of impersonality about interviews. To address a person in an impartial and unbiased way enables the person to see himself objectively. The withholding of taking sides, blaming, or condoning, gives a patient a sense of fair play and a willingness to hear the truth.

The consultant must maintain a sympathetic attitude and must yet be objective in giving advice. More important than technical training is the cultivation of the proper attitude toward the patient. One must be really interested in the sufferer, one must in a way really love his patients. One has to be infinitely patient and genuinely interested and yet detached, "cold-blooded" enough to be objective in the handling of the sufferer.

To understand types is to understand his people and the peculiar difficulties the type psychology thrusts upon them. It will help the counselor to understand himself, for if he is an introvert he will see the difficulties of the moral and religious life from the introvert point of view,



and may not be able to understand why he does not "appeal" to certain people. To recognize one's limitations is to correct them, and a much wider ministry is open to the man who realizes that both types are likely to be in his congregations. This knowledge, however, will be of inestimable value in dealing with those of his people who are finding difficulties in their personal relationships at home or in business. He will help the introvert to see the objective situation as it really is; the extraverted he must compel to face the unpleasant task of controlling emotions which some experience has aroused. He may find that the real difficulty is that an introvert is attempting to react in a manner opposite to that natural to type, or vice versa. The counselor will be well advised and well repaid if he turns to a study of the types as they are presented in the volumes of Jung and Hinkle.

Every psychoanalyst must have himself psychoanalyzed in order to understand himself, and especially to avoid disaster when the "transfer" occurs. The soul analyst undergoes the same possibility and must know his own weakness. Dick suggests that there is danger of a "transfer" in even holding the hand of a sick person. Here the counselor is a privileged character, his life must be above suspicion, and his motives absolutely pure.

There are certain details to be followed in the interview. Deal with individuals and not mere general types. No two individuals are physiologically or psychologically alike. The world is not inhabited by types but by individuals, each with his own physical and psychical features which constitute him an individual over against the fellow members of his race. Types are intellectual ab-

stractions and ideal creations from which each individual varies in some or several respects.

The soul doctor must notice everything in the individual, yet without seeming to notice anything—the face, the form, the carriage, home, the signs of nervousness in hands, or the way of sitting on chairs, or playing of fingers or fluttering of eyelids. Do the eyes and lips show terror, or shame, or sorrow, or self-pity? This must all register with him, without his giving evidence of curiosity, or of “sizing-up” the man; and he must see the man beneath, and not be thrown off by the appearance of clothes.

To make the diagnosis, he must direct the conversation in such a way as to enable him to decide what the patient has come for and what sort of help he desires. Then he must put questions or make suggestions, wisely, insistently, patiently and with tact, and allow the patient to talk freely until he has come to the heart of the trouble.

How shall the “soul doctor” discover the trouble? The diagnosis of a maladjustment in mental hygiene is a condensed statement of the practitioner’s conception of the remote and immediate causes of the condition, the nature of the mechanism shown, and the most likely course of treatment. A brief summary of the most pertinent facts of the problem shown, the aims of the treatment, the procedure to be employed and an estimate of the prospect of success should be made. A diagnosis is not considered final or complete but is constantly revised as more information is discovered.

Methods of making a diagnosis:

1. A case study of the situation and the life history, as in the record,

2. Study of the revealings in expression, gesture, voice, posture, and words, in omissions, emphases, tensions, hesitations, interferences, blockings, arousals and other behavior reactions, in connection with the nature and purport of the material under discussion for the moment, together with later testings through inciting questions and statements prepared for this end.

3. A study and examination of the materials supplied in an unreserved outburst of feeling, thought, and action after the establishment of a peculiarly confidential relation (*rapport*), between the agent and the patient.

4. A comparison of ratings made by a number of persons associated with the patient: informally, from family or friends; or formally, in a questionnaire sent out.

5. If necessary, a complete examination by a psychologist, a physician, a psychiatrist, and social-case worker. The most necessary is a physician, but if there are mental symptoms, an examination should be made by a psychiatrist.

6. A study of the unconscious, as revealed in unintentional behavior, or free association tests, or hypnoidal states.

7. A study of the patient in subsequent interviews, through records made at different periods.

8. A deliberate and conscious and co-operative study of the cases by the patient and the counselor as a solution to the problem and finding the way out.

The adviser must learn all he can about the patient—his personal characteristics, his mannerisms, his disposition and temperament, his qualities of character, his habits and interests, his ambitions and desires, his talents, his skills, his physical and mental capacities, what

are his resources, what is his financial condition—and for this purpose he needs a questionnaire.

Data: Name and age (in years and months); address.

Orientation: (a) How long has he lived there?

(b) Where did he come from here?

Occupation: (a) What is business, profession, or occupation of patient?

(b) How long has he been thus occupied?

(c) What previous occupations (details)?

Family History: (a) Father and mother; were they unusual or abnormal?

(b) Were either nervous? Did they have convulsions, headaches, or insane or constitutional diseases?

(c) Was either criminal or a suicide?

Intelligence: (a) Where did he go to school? For how long? Why did he leave?

(b) Was work hard or easy?

(c) What books does he read? What newspapers?

Family Relations: (a) Names, ages, relationships of members of household.

(b) Are there racial conflicts in family or with community?

(c) Any frictions between members of family?

(d) Any friction between parents and children?

(e) Is he married? When? Is husband (wife) living?

How many times married?

(f) Is married life happy; if not, why not?

(g) Are there any sexual difficulties?

(h) How many children? Sex? Age? Nervous or mental diseases?

Social Relations: (a) Is he earning as much as he needs or ought to earn?



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(b) Does he like his job? Why not?

(c) What groups does he belong to? What churches? Lodges? Unions? What part does he take?

Medical History: (a) What diseases in early childhood? Convulsions? Rickets?

(b) When did he begin to walk? To talk?

(c) What diseases has he had and what aftereffects?

(d) Alcoholic drinks and effect?

(e) Has he had gonorrhea? Syphilis? What treatment?

(f) What autoerotic habits or experiences?

(g) When did he last consult a physician? For what illness? What treatment?

Present Illness: (a) Physical health; apparently good or poor? Sleep well? Eat well? Easily fatigued?

(b) What is primary health problem?

(c) Is cause an accident or disease? A physical or mental shock? Extraordinary strain prolonged? Any excesses?

(d) Did present condition come on slowly or all at once?

Mental Condition: (a) Does he feel "all right"? Depressed, or excited, or indifferent? For how long?

(b) Is he sad or afraid?

(c) Is anyone watching him or persecuting him?

(d) Who does it and why?

(e) Does he hear things? Noises or voices?

(f) Does he see things? People or things?

(g) Has he consulted a neurologist or psychiatrist about this? Who? (Report to this physician that the patient has consulted you and abide by his advice in case any of these mental symptoms are present.)

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Personal Problems: (a) What has brought him to see the minister?

(b) What is his problem? Behavior? Temptations? Undesirable habits? Loss of faith? Loss of peace of mind?

Where is he maladjusted? (a) Personal: Conflicts? Tensions?

(b) Social: Family? Growth? Morals? Work?

(c) Spiritual: Lost relationship with God?

Symptoms: (a) Fears: Of what? How continuous? Worried? Anxious?

(b) Sense of guilt: Is it supersensitive or real moral failure? Of what guilty?

(c) Inferiority feelings: In relation to what?

(d) Loneliness?

(e) Is he repressing or "holding" anything from himself?

(f) What is his attitude? Timid? Anxious? Worried? Frightened? Erratic? Poised? Confused? Overconfident? Boastful?

(g) Does he seem to evade or face the facts of life?

(h) Are there frustrations or escape mechanisms?

Decision: 1. Is this a case for simple pastoral advice and spiritual help and consolation? If so, what can be done?

2. Are there illusions, hallucinations, hysterias, phobias, persecution complexes or religious complexes that are pathological and demand medical treatment? Physician or psychiatrist recommended?

Use of the questionnaire: If possible, avoid use of formal questionnaire altogether. If it carries formality or stiffness, it causes patient to draw in on himself, he

does not like to be formally questioned and above all does not like to be considered a "case," and objects to having his "case" described on paper where someone may have access to the records. Doctor McComb stated publicly that he had destroyed all records of cases when he left Boston. The adviser is not a social worker, a physician, or an inquisitor, and too much assumption of authority will destroy the value of the interview.

This questionnaire, or one that he may make for himself, should be a guide for the friendly conversation. He should have the general outline of the questions in mind and be able to suggest, as though offhand, the subjects on which he wishes information, such as, "What line of work are you in?" "How have you stood these times?" He should not be too aggressive in asking questions. It awakens negativism and resentment. There is always danger in asking questions of too intimate a nature, or too much in detail, or too much about sex. Hastiness and pressure of work prejudice a good examination. It is unwise to use technical language.

He should initiate the conversation on the subject he is interested in and then allow the person to talk at will and as long as he will on the matter, saying, "That's fine," "Now we are getting down to facts," "Let's see—."

After a particular interview is ended, he should immediately write in his questionnaire for that person all the information which he has obtained, and if the person is to come again, read over the questionnaire before he arrives. Then he can begin where he left off. He should not trust his memory, even on unimportant cases. His file of cases will be his education if he watches results. Every scientific physician today writes every sign, symp-

tom, and the treatment of his patients on a separate folder.

The consultant must always hold in mind that symptoms are not the disease, but that the disease causes the symptoms. Therefore, in spiritual diagnosis, he must look always for causes, not for effects. He should listen to what the patient says, but always in his own mind be asking, Why does the person say this or that?

The face value which the patient gives to facts and the real value which must be given by the consultant to the same facts are very different. He must be conducting a dual study: the thing being said, and in his own mind the seeking of a chain of causes. Do not argue. People are hardly ever convinced by argument. When a man has positive opinions, it is seldom wise to oppose him. It is vastly better to wait until more opportunity for thought or the logic of events convinces him; then when he arrives at a decision the plan is his own.

After hearing and understanding the patient, the adviser must decide what ought to be done in the case. Is this a case for a physician—are there evidences of physical disease? Is this a case for a psychiatrist—are there evidences of mental diseases, such as delusions, hallucinations, symptoms of dementia praecox? In case of any doubt, do not attempt any spiritual treatment until you have the report and advice and consent of the psychiatrist.

In order to arrive at a decision as to the nature of the case it is necessary that the counselor should have clear definitions of certain abnormal symptoms which he will most frequently meet.

A. Illusions: The illusions of everyday life are a



commonplace in all texts on general psychology, as is their interpretation. We discover the vision to have been an illusion by checking up with other experiences, but when we see a person who continues to insist that the bedpost is a ghost, or that he hears music in spite of the fact that we show him the humming motor; if, in other words, we find a person who does not check his illusions against other experience and recognize them to be illusions, then we conclude that such a person is suffering abnormal illusions.

B. Abnormal Illusions: Illusions due to abnormalities of the sense organs, the sensory tracts, or cortical functioning, which are checked up and recognized as illusions by the patient, might be called abnormal, because of the degenerative nature of the factors producing them, but it will add to the clarity of thought if such be termed borderline illusions.

C. Hallucinations: It must not be thought that hallucinations are confined to those who are clearly diseased, nor that the occurrence of a hallucination is a sure sign of insanity. The dream experiences of normal minds are hallucinations. In fact, there seems to be ample evidence to warrant the assertion that hallucinations occur, though rarely, in minds which are normal, so far as anyone knows.

The way in which the meaning accrues to the sensory or imaginal process distinguishes the normal from the abnormal. If a patient hears a voice and fails to find with his eyes any human presence who might be the source of such a voice and persists nevertheless that the voice has an objective origin, although invisible, then there is something obviously wrong with the way in

which meaning accrues to the centrally aroused process. That patient is properly said to be abnormal and to suffer hallucination. But if a subject hears a voice and is visually unable to discover any human cause for it, and then concludes that he has experienced a hallucination, it is obvious that the functioning of the meaning process was very different in his mind. From the point of view, then, of the psychology of illusions and hallucinations, the peculiarity of the abnormal mind lies in a defective functioning of the meaning process.

Hallucinations may pertain to a single sense or may involve several senses at once. These combined hallucinations occur in dreams and also in states of clouded consciousness, such as delirium. Hallucinations involving only one sense are, however, more common. They may involve any one of the sense departments. Auditory hallucinations usually take the form of "voice." These voices must be distinguished from the so-called "voice of conscience," which is an inaudible voice, a mere feelingful thought. The hallucinatory voices are experienced as audible words, just as if some person were actually speaking.

There is a very great variety of visual hallucinations. The patient may see an absent friend, an animal, a devil, snake, insect, etc. These visual hallucinations may be stationary or moving, permanent or transient, and large or small in size. For instance, in delirium tremens the hallucinations are likely to be small moving objects, such as insects or small animals; while in dementia praecox they are more likely to be normal in size, stationary, and relatively unchangeable from day to day.

Hallucinations are very common in mentally diseased

conditions. Auditory hallucinations are the most frequent. In one curious form known as "audible thinking" the patient complains that his thoughts are so loud that everyone must be able to hear him think. Visual hallucinations are also frequent. Smell and taste hallucinations are quite common. Hallucinations of an organic nature are also encountered. Sometimes these are quite specific, as of pregnancy, while others are much less definite in nature; as that the "head feels as though it were made of wood"; that there is "lead in the stomach"; that there are internal cutting, gnawing, or biting sensations. Rarely are hallucinations enjoyed. The affective tone of the emotional reactions is usually unpleasant. The disagreeable and often persecutory nature of the hallucinations makes the patient unhappy, or depressed, or terrified. The patient may endure them for a time and eventually rebel against them and if they persevere he may exhibit more serious symptoms.

D. Delusions: When thinking becomes so badly distorted that the thinker fails to check up with reality he is said to be deluded. The delusion is a false belief, which persists in spite of normally convincing contradictory presentations. Abnormal illusions may be caused by or be supplemented by delusions.

There are delusions of reference in which the patient believes that every little event of the day, even the sight of people conversing across the street, has some reference, probably sinister, to himself. There are delusions of persecution in which the loss of a hammer, the accidental tearing of a dress, the sound of a distant typewriter, the locking of a door, the passing of a policeman, are all interpreted as meaning some organized effort to annoy.

There are delusions of explanation which apparently offer a reason for the persecutions. There are delusions of greatness in which the patient figures as being the true Queen of Japan, the wealthiest person on earth, the ruler of the universe, the missing scion of a royal house. There are depressive delusions of having committed the unpardonable sin, of having been the cause of the death of all the patient's relatives, and the like, and there are somatic delusions of having a ton of lead in the stomach, angels knitting in the abdomen, or of having no abdomen or stomach. These have been variously listed and classified. Sometimes the patient manifests little but a persistent belief in some patently absurd notion; sometimes delusions are elaborately developed and the patient will have a long story to tell.

Obsessions are ideas which recur to the mind again and again and which the will is unable to banish. They are related to the unconscious mental machinery and the theory held by psychoanalysts is that they are innocuous ideas substituted for a painful idea. In an ordinary healthy-minded person they are not extreme, but in clinical cases they may become very severe. A questionnaire among two hundred freshmen of Washburn College revealed that fixed ideas come involuntarily to 29 per cent of the students. In the same test, given in the University of Michigan, 25 per cent of the freshmen stated the same experiences in regard to fixed ideas.

A compulsion is an involuntary urge to do certain acts under certain circumstances and to repeat the act under the same circumstances. These acts may be very simple and are common in everyday life, such as touching every lamp post, or they may become abnormal when the urge



is very great and the action complicated, and are pathological when seen in neuroses.

How does the soul physician direct spiritual power? A competent counselor must be familiar with the methods and resources of religious psychotherapy, and these methods and resources must become part of his mental life, just as the surgeon learns anatomy from the texts and relearns it until he knows nerves, blood vessels, and muscular structure with the ends of his fingers. The approach to the problem of any individual must be through the willingness of that person to reveal his mind and heart.

The task of approximating a knowledge of other people would be impossible were it not for the fundamental need which every human being has for self-revelation. If this is true when the course of life is clear and undisturbed, it is most assuredly true when a man is in difficulty. Then reticence requires an almost conscious effort and confession is often a necessity. There are times when the urge to unburden oneself will not be denied and one is compelled to speak. With many people, inhibitions are weakest immediately after an emotional experience. It is then that such persons are most likely to tell what is upon their minds. With others, the desire to tell is cumulative in its urgency, until at length they can hold their secrets no longer.

It is indeed the unusual man who is able to resist the desire to unburden himself, and frequently the price of resistance is a miserable and an embittered personality. People want to talk. When they hesitate, it is only because they wish to be certain that they have found an individual in whom with security they can confide. And

by security they mean, not merely safety from a repetition to others of what they have told or the assurance of action that can be taken to help them, but also the far greater security that comes from the knowledge that they are understood, for people seem almost instinctively to believe, and rightly, that the individual who understands them will guard their secrets and will be able to advise them.

There is therapeutic value in the conference, in which the troubled person is given an opportunity to frankly face and discuss his problem with a sympathetic, understanding person who does not have a condemning, moralistic attitude toward his deviations from rectitude. The method of revelation is talking things over and over again, not in psychoanalyzing but in free association that will make the individual empty his mind. The counselor should not ask questions to begin with, but use a method of suggesting associations, such as, "And then—," "Well, why—," "How did this happen?" Brown calls this "autognosis."

Whatever success a man has in learning to know those whom he is called upon to help rests largely upon whether or not they see in him this capacity to understand. It is the surest introduction to confidences. The person who would possess it must have a fundamental respect for other people. He must feel the unique importance of each individual who approaches him and he must have a faith in human nature that is founded, not upon a sheltered optimism, but upon a knowledge of the facts. He must be impersonal. He must not judge. He must be detached and objective. His attitude toward the person who has revealed himself must not change

from what it was before. An exteriorization of conflicts in conversation or confidences relieves the tension of the conflicts. The patient makes an adequate emotional response which has been inhibited. An unshared or unconfessed sin is like a cancer eating into the heart.

The therapeutic effects of this method are possible only where each individual is seen in private, is allowed sufficient time to discuss intimately his whole problem with all its ramifications and implications, as he sees it, and when the information and advice given are fortified by a scientific understanding, by the counselor, of those underlying causative factors which are perhaps unrecognized or misunderstood by the patient, and when treatment is carefully fitted to the particular needs of the individual case. This revelation may often deepen into a desire for release. There are people burdened with a sense of wrongdoing until they feel that it would be a relief if they could unburden their hearts to someone who is pure, sympathetic, and understanding.

The revelation may proceed to a discharge, a catharsis, a purging of the mind in moral cases through confession, which is the pouring out from the soul of all its consciously suppressed and hidden sins and poisons and burdens and griefs and sorrows. But the confession must be carried on in complete honesty, and wholly. The one confiding must tell the truth, the whole truth, and nothing but the truth, and make a thorough job of it.

Psychologically, confession is the means by which the man is restored to his powers. Unconfessed sin produces a brooding disposition, characterized by depression, and a sense of hopelessness. "Confession changes a skeleton in the closet to a museum specimen." The very fact of

making the confession is a purging influence to the soul. If the matter confessed is a definite departure from a moral life, then the religious counselor has the possibility of bringing the one confessing to a release in divine forgiveness. The soul physician should make it clear that confession cannot be separated from penitence, that is, a deep and true sorrow for the sin and a determination to be done with it; that the cleansing of the heart is by God—"He pardoneth and absolveth all them that truly repent."

The confession, outside the sacramentarian churches, should be a voluntary act. It should be unconventional, unstandardized, without any special technique. The spiritual adviser, if he knows the way of the soul, can bring the man to God and convince him of the authority and prove the reality of divine forgiveness.

The simplest next step in readjustment is redirection through simple advice. Advice is of help when the patient has exhausted his own "trial-and-error" method and is willing to accept advice from one in whose wisdom he has confidence. Advice is a proper, legitimate, and useful aid, following the process of revelation and release, when the patient has entered the state of re-education or redirection of energies. Advice is valuable and persuasive when presented in an impressive manner, with a sympathetic understanding of the patient's condition and a clear vision of the advantages which it provides, and therefore its attractiveness.

Advice is valuable only when the patient is willing to accept advice. If a patient says, "I know just what you are going to say, I have had so much advice," it does not modify the individual's emotional attitudes or basic be-



havior pattern if they have become fixed through long use or the intense satisfaction that they provide for strong motives. Hence it can only be used where the patient has a good understanding of his case and is trying to remedy his mistakes; then the advice of the counselor may be accepted.

Re-education of a person who has lost his way and interest in life is a complicated procedure. It may begin by simply helping the patient to understand himself and his environment. A maladjusted person has a tendency to respond to certain conditions and situations in an emotional rather than a rationally objective way. He must be made to see that this is because of the habits acquired during the formation of his character, and he must be taught to face the facts of his own life and character. This self-knowledge gives him the mastering of intelligence over emotion. The aim of treatment is to change the individual's responses so that they are no longer of the disorganized emotional type, but of a constructive problem-solving type.

Self-knowledge is a triumph of intelligence over emotion, but such victories do not come quickly. Human beings surround themselves with such a network of sensitiveness that any close approach to their personalities is often impossible. Frequently one must try to accomplish by indirection what one would prefer to bring about through more direct methods. One must explain adjustment after adjustment, in the hope that at last, by implication, the individual may come to realize that the fundamental difficulty lies in himself. Sometimes he can be helped to self-understanding through an interpretation to him of those who are involved in his adjust-

ment. Sometimes one must give up hope of interpretation by any means and must rely instead upon quickening his desires and extending his interest and upon other phases of the art of helpfulness. It must be remembered that the facing of a man with the facts about himself is a method fraught with difficulty, and to be adopted only when there is good assurance of success.

Re-education may use the method of reassociation, which means the discovery of the emotional complex, the detaching of the emotions from their morbid attachments, and reassociating, or linking of the nucleus of the complex, with a new emotion. The patient thus assimilates the stimulus as something familiar, acceptable to his sense of values and to be looked upon calmly. For illustration, a man is to make a speech, and he has a nervous dread of speaking. Dread, fear, and worry add to his nervous tension. To disassociate this tension he is to visualize himself, in imagination, as speaking calmly, easily, and directly, and when the time comes he is to recall vividly the imaginary visualization; which will be like rehearsing a part in the play and so preoccupy his attention as to give him aid in further control of himself. This method may be used in dealing with temptations to sensuality—reassociating the sensual vision with suggestions of purity, motherhood, etc. A man may so habituate himself to this method that thoughts of high and holy living will wither up the roots of lower desires.

Re-education may be carried on by the use of the method of suggestion. A suggestion in the technical sense, here used, is an idea which is presented to the mind so forcibly that it is accepted without criticism or argument. A suggestion is a stimulus which leads to a par-

ticular kind of response. It produces an unintended or dissociated response. Such a stimulus may be a mechanical movement, a gesture, or an action, an unintentional imitation, as in stuttering. It may be an oral one; it may be a proposition which results in belief or action when the proposition is uncritically accepted, that is, if it results in the inhibition or dissociation of the critical powers or processes, as a "tip" in stock buying or in races. "Fads," "Jitters," "mob-hysterias" belong here.

A suggestion is thus a stimulus which produces a piecemeal or part response. It inhibits certain mental processes, such as seen in buying from a high-pressure salesman. Never make a decision in the presence of a salesman. A suggestion is more effective if it is indirectly presented and is a substitute for advice and the patient feels he has discovered the proceedings for himself; or on the margin of consciousness in fatigue, drowsiness, and sleep, or dispersed attention. Suggestions are more effective if frequently repeated; they become almost irresistible if given by the mob, crowd, or society, as, "It isn't done," or from a person of authority, students and scholars, physicians of prestige. Suggestibility has a tendency to inhibition of critical faculties caused by submissiveness. For illustration, in the presence of a crowd, or, when the suggestions fit in with his emotions, as in fear and anger, or love; or in fatigue or illness, when the patient is submissive to his physician; or received in dispersed conditions of consciousness, drowsy and dreamy states.

The classic treatment of this method is summarized in the *Laws of Suggestion* by Baudouin:

"1. Law of concentrated attention. The idea which

tends to realize itself is an idea on which spontaneous attention is concentrated.

"2. When the idea is enveloped in a powerful emotion, there is likelihood that this idea will be suggestively realized.

"3. Law of reversed effort. When an idea imposes itself on the mind to such an extent as to give rise to a suggestion, all the conscious efforts the subject makes in order to counteract this suggestion are not merely without the desired effect, but they actually run counter to the subject's conscious wishes and tend to intensify the suggestion. The efforts are spontaneously received, so as to re-enforce the dominant idea—"I should like to but I cannot." The harder he tries, the more it becomes impossible.

"4. Suggestion acts by subconscious teleology. When the end has been suggested, the subconscious finds means for its realization, as in hysterias.

"5. When the will and the imagination are at war the imagination invariably gains the day.

"6. Suggestions of reassurance that the maladjustment is curable and that the right measures are being suggested builds up the patient's confidence in himself and stimulates his constructive efforts to readjustment."

Autosuggestion is the introduction by the person himself of certain ideas under conditions which will bring them into the depths of the mind, where they can actualize and thereafter influence the personality.

1. If an idea be acceptable to the whole of the mind, and if it be reasonable, it has a teleological effect; it tends to actualize itself or become true.

2. The idea must be accepted by the whole of the



mind. If it is in its nature not true, it will fail, as a toothache. If a person is critical and is afraid of being superstitious, or challenges every idea, then a suggestion will do little. If the idea suggests associated negative ideas, it will negative the suggestion.

3. The greater the emotional charging, the more deeply it sinks into the mind, as shock or fear in childhood may remain during life.

4. The best condition for the receiving of suggestion is when the mind is quiescent, just before going to sleep and just after awakening, because the conscious mind is least active at this time.

5. Will does not play any part. Coue's "law of reversed effort" is the force of imagination in direct ratio to the square of the will. When will and imagination are antagonistic it is the imagination that wins.

6. The suggestion should be positive and never negative.

Sublimation is the process of rendering passion sublime. The driving forces of our personality are the primeval instincts or drives fired by equally primitive emotions. In the ordinary course of life today, with its conventions and restrictions, there is a very decided limit to the amount of these instincts which may be expended—the healthy animal play of boys, and especially the drive for satisfaction of the sex instinct.

Man has the problem of this surplus energy on his hands. He may live out his instincts and drives, expending them as in their original purpose. He will then find himself in conflict with the conventions and involved organizations of society. He may put it in a perverted channel, in ways not intended, and he will find himself

up against troubles with his moral, mental, and physical health. He may repress it, that is, deny its existence, and force it down into the subconscious, where it will probably assert itself in nervous if not mental disorders. He may discipline his desires or drives so that his life remains within the limit of convention and then relieve the extra strain by canalizing the drive into a new channel, and find an outlet in some other creative capacity. This process is called sublimation—if the type of behavior which results is approved by society and serves a useful purpose.

Freud says that the healthy life is not one which is free from repressions. It is one in which suitable alternative means of expression have been found for the energy of the instincts which are not permitted direct satisfaction. The alternatives must be such that they are approved by society, by the individual's superego, while they are also possible and so are in accord with the reality principle. Such outlets are known technically as sublimations.

Ideally conceived, sublimation is a process of undertaking to educate our instincts and restrain our impulses; it is an attempt at refinement of that which is crude and primitive. Etiquette, good manners, is a form of sublimation.

Self-realization consists in diverting our biologic energies from lower to higher levels of activity. Pugnacity may be sublimated into athletic rivalry or commercial competition carried on according to definitely fixed rules, or anger may be stepped up into a form of righteous indignation and lead to identification with some great moral or religious cause.

In the case of defeat and frustration the use of every available dynamic becomes of supreme importance. Emotional expression through other channels—through friendship, through the appreciation and enjoyment of nature, and through the cultivation of any latent artistic abilities—should be encouraged. There should be a search for new goals, for new purposes. More ways for the sense of achievement should be secured. The spiritual life of men becomes, if possible, of even greater importance. The individual who is blocked from one drive must be helped to a larger and more varied use of the rest.

For almost all of the acquired patterns of emotional reaction there can be found substitute patterns which will give expression and avoid the mental conflicts of repression. The energy back of the basic drive may be drawn off, some of its superficial phases in physical exercise or physical work; some of it may be changed from its bestial expressions to a more glorified form of romantic courtship and marital devotion and sacrifice for the perpetuity of family life.

This transformation of our drives into higher methods of expression is the very essence of the Christian transmutation of life. It is to be borne in mind that the verb in all of Christ's laws of life is love. Regeneration is birth of self-love into selfless love for all men, from centripetal to centrifugal passion. The passion deep and strong in Christian character is the height and depth and length and breadth of the love of God which passeth all knowledge. The purpose toward which the passion is directed is supreme—the kingdom of God, of righteousness, love, and peace here on earth. The sustaining

moral dynamic, which empowers men for every circumstance, is "My Grace is sufficient for thee," and is the enduement of cosmic spiritual energy.

One final method might be called relaxation and enforced suggestion. Only a trained psychologist or psychiatrist should attempt to use hypnosis as a therapeutic agent. The mastery of technique, the physical, mental, and moral disasters which may result from ignorance, all forbid the use of hypnotism by the spiritual therapist.

There is, however, an advantage in a counselor being able to teach a method of relaxation, such as given in Jacobson's *You Must Relax*. Overtense nerves are always fatigued and simple exercises in "letting go" are restful and recreative. A state of relaxation is especially conducive to the reception of suggestion, and often the soul physician, without even using or implying hypnosis or hypnoid conditions, in a quiet, firm, low-toned voice, may give suggestions to one thoroughly relaxed, which will have great power.



## CHAPTER IV

### WHAT ARE THE PROBLEMS?

THE primary purpose of religious organizations is, of course, constructive, through training, education, and inspiration, yet there is a vast work for the churches which is purely reconstructive. The churches believe ideally in "the communion of the saints," while in reality they are congregations of sinners. Just as in psychology the "perfectly normal" person does not exist, so in religious life the confession, "We have done those things which we ought not to have done, and we have left undone those things which we ought to have done," must be made by the Church universal. The number, variety, and extent of the problems for readjustment are not a reflection on church organizations, but on the contrary, are its glory; that is exactly the purpose of the Church. It receives into its membership people with all sorts of difficulties, of money or mind or morals, and by the use of all its resources seeks their development or rehabilitation.

Professor Harold Roupp, of Newton Theological Seminary, asked fifty pastors to distribute a questionnaire among members of their congregations, asking, "What is the outstanding problem you face in your thinking and living?" Forty-six per cent wrote "None" in the space provided, in case they had no problems. The problems which were stated by the church members were classified as: The Individual and His Inner Self, 47 per cent; Family Relationships, 23 per cent; Relation-

ships to Social Groups, 15 percent; Relations to God and the Universe, 13 per cent.

For systematic treatment, the problems which the counselor will meet are classified into three types: Religious Difficulties, Problems of Personality, and Problems of Abnormality.

Religiously Maladjusted Cases are:

1. Those who have intellectual problems in their religious thinking. A great many young and old are puzzled in the face of religious problems. The older are so because the old modes of thought have been broken and they cannot accustom themselves to the new ways; the younger because of the apparent conflict between science and religion, between what they hear in the pulpit and what they hear in the classroom.

In dealing with intellectual problems the counselor must distinguish between those who have certain ideas or plans to "sell" to the adviser, and those who are in honest difficulties in their thinking. When a man shows that he does not merely desire to argue but is seeking light on religious problems the counselor has a very grave responsibility. Every counselor may use problem preaching and discussion classes as general methods of approach, and his training ought to be such that he can give the best possible defense and explanation of religious truth.

In personal interviews the counselor will have to find his way by one of two methods: he may appeal to a rational faith, which is the projection of the known into the "not yet known"; on the same basis as that by definition parallel lines are those which continue the same distance apart to infinity (or did until Einstein came). Or,

he may ask the counselee to face the fact that there are undefinables in the religious life just as in every field of knowledge—we do not know what time is; atoms and genes are theoretical; and in like manner the infinite reaches of good and evil are not solvable by a finite mind.

Religious teachers should resent the assumption of science that matters of the religious life are mysterious, with the insinuation that they are therefore irrational. Let the scientist, before talking of “mystery” and “mystic,” define some of his own terms, such as life, electricity, space, etc. The dean of American psychiatrists says that everybody knows what consciousness is and yet no one can define it. Millions of men know what God consciousness is, but as the French say, *Un Dieu défini est un dieu fini*. How God gets into consciousness is no more a mystery than how anything else gets into consciousness.

2. The Child Mind in Religious Thought: Certain types of mind are unable to break the molds of the childhood conceptions, and these are carried over to their later years. This is true in all parts of the mind—phantasy, imagination, fairies, luck, etc. But the higher degree of intelligence and the expansion of knowledge shows that these concepts of earlier life are not literally true. This type of mind clings to the conceptions of childhood as the only possible meaning and to give them up means for them to abandon religion, yet they feel that religion is necessary and hence a conflict, perhaps accentuated by the authority or accepted opinions of their church or clans. This is the root of conflict now between the older accepted traditional interpretations of religion and the movement of information, intelligence, and knowledge

in broadening the field and deepening the meaning of the religious life.

In religious life the individual must be brought to realize or see that the childish concepts which have been given him because of the limitation of his intelligence are "symbols," or picture words, and that he must pass from the symbol to the things symbolized. "Big Man Father" thus becomes a personal living spirit expressing Himself in care for His children. The ultimate solution is to be found in a program of religious training and education which will make easy and natural the change and amplifications, from childhood to age, in their religious concepts.

With adults there must be a realization of the facts in the case, their mental limitations, and a slow, respectful approach to the difficulties; in preaching, conversation, and interviews, and a flank attack, making the change in their belief a part of the whole change now going on in the world, rather than a direct frontal charge.

3. There are Those Who Use Religion as an Infantile Escape. Instead of meeting difficulties, this type resorts to phantasy and magic—the "Aladdin's Lamp," or "God-as-Santa-Claus" type of thinking. There is a normal dependence in God, which is to be distinguished from this infantile retreat and magic expectancy. Phantasy cuts off the mind from fact, makes it a castle in the air without foundation in the homely earth. Imagination must be related to life and theory to fact.

The true religious life is not found in the baseless vision of a heated imagination, infantile fancy, or day-dreaming. The religion of Christ is not an escape in phantasy dreaming, or a compensatory mechanism for



frustrated desires. The soul of the Christ religion is to go out into reality to face things as they are. This was the challenge of the Christ. He feared that there might be a wishbone instead of backbone: "Why call ye me Lord, Lord, and do not the things that I say?" There was no "singing my soul away in everlasting bliss." His was a bugle charge to the attack. "Take up thy cross daily." Take up your cross, and the world, the flesh and the devil will see that you are nailed to it. His end, the infinite end for a Christ man is, "I have fought a good fight." There's fighting all along the line for the men with the heart of Christ, "leading on before."

4. There is the Type with Stereotyped Suggested Secondhand Religion. The individual who has had no personal experience in religious life, who respects religion and all that it stands for but is personally not interested.

The person who has an induced or accepted second-hand experience is the type which has inherited religious forms and rituals, who accepts what he has been taught, who believes in doctrines, who submits to authority, and is very apt to be satisfied with ritual and formal observance of religious duties.

One who is set and satisfied in this form of life must be brought to see that there is much more content in a real religious experience than mere formality. In life the experience of beauty cannot be put into words, for then it becomes an idea, a concept, and not an experience. So the religious experience cannot be taught or received secondhand. The experience may be evoked, or induced, but it must be actually felt in one's own life—it cannot be "experienced" secondhand. Great care

must be exercised, however, that the "experience of religion" be not interpreted narrowly nor exclusively in the terms of the counselor's own experience. It is to be remembered that there are ten gates to the city of God, and each gateway of gold gives entrance into the celestial city.

Problems of personality constitute 47 per cent of Ruopp's classification, and are stated by those who wrote out their problems as:<sup>1</sup>

A. Personal maladjustments, thwarted ambitions due to physical misfortune, family responsibilities, lack of educational advantages, struggle to make a living.

B. Personality disturbances: feeling of futility, sense of frustration, personal inadequacy to meet life, the inferiority feeling, feeling of insecurity, fear, anxiety, suspicion, sense of being alone in the world, "unneeded," unwanted.

C. Moral problems arising from wrong attitudes: jealousy, greed, pride, hate, selfishness, anger, conflicting desires, antisocial behavior, alcoholism.

D. Personal feelings of sin and guilt, resulting from questionable behavior, inner conflicts, conflict with the moral standards of society.

The consideration of these problems may be systematized into the following divisions:

1. The Undeveloped Individual: Any of the egoistic attitudes of childhood are liable to survive. To understand how common these are one has only to observe in any social group of adults, where the individual members feel unconstrained and talk freely, how much like children they all are; how each tells of his own accomplish-

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<sup>1</sup> From *Christian Century Pulpit*. Used by permission of Professor Harold W. Ruopp.

ments, magnifies his own ego, defends himself by blaming others, but resents any attempt by others, however politely made, to dominate the group or to show off as superior; how sensitive to criticism everyone is; and again how surprising is the childlike conceit of knowledge and how alarming the lack of intelligence and desire to learn; in general, the poverty of the group in knowledge and its wealth in opinion. All this egoism, or humility, all this pedantic, trivial self-interest, or this courteous kindness, is usually naïvely and often grotesquely unconscious.

2. The Unintegrated Life Without Plan or Purpose: There is a type of person who seems intellectually not capable of foreseeing beyond the moment; he lives on the titillation of the nervous system. This inability to foresee and plan leads to financial disaster from lack of thrift and to moral disaster because the individual cannot count the cost of immoral indulgences of appetites and passions. This is the individual without any plan or purpose, who sets no value on himself, good or evil. He does not individualize himself; he is "just like everybody else," and has no other feeling except an exhilarated herd instinct. He lives for the satisfaction or the excitement of the moment. When the satisfaction or excitement is gone, there is a sense of emptiness or worthlessness, a beginning of a sense of inferiority.

The innate intuitive drive for unity, for self-respect, the self-regarding instinct, the desire for approbation, all react on him, producing a sense of frustration—they "do not belong"; they are "good for nothing."

3. There are Some Who are Morally Undisciplined. They have never subjected the instinctive drives to direc-

tion or control, so that these drives run riot. The person rationalizes: "The biological urge (sex) is too strong for me." The number of cases of this type and the depths of degradation to which these "victims" go in unnatural vices and violations of all laws of decency will revolt an adviser who has never known this "sexual underworld."

The therapy of the religious counselor, in the three subtypes given, must begin by insistent revelation that there must be in every life an ideal; and that there must be in every human life a directing force, an "élan vital," an "entelechy," which does not stop short of realizing the potential bound up in every life, not only of physical and mental development but also the potential for relating life to the realms of value and personality which constitute religion.

Morgan, on the basis of psychology, asserts that progress from "all of self" and "nothing for others," to the place of "all for others" and "nothing for self," is a purely biological movement for which we should take no credit. If this be so, then biology, or the science of life in itself, tells us what ideal manhood and Godhood are. "All for others" is the heart of the Christian gospel and the heart of an all-wise God of love. Therefore, in a deep biological sense, the unreligious man is one only partly developed; only the one who has attained "the measure of the stature of a perfect man" is the flower of a completed humanity.

Every human life, however degraded, keeps some candle burning before the altar of his self-respect. It is doubtful whether the last dim spark of this idealism can be wholly extinguished, and it is to this that final appeal



must be made, and a process of adjustment and re-education started and carefully nourished by all psychological and religious aids. These persons must be convinced that spiritual living is a necessary part of a full and complete life. Personal acceptance and allegiance to the life and teachings of Jesus brings a positive salvation in a growth of the higher qualities which make up manhood, until we come to a perfect man. There is also a negative salvation from dwarfing cynicism and rebellion and the preservation from the destructive effects of sensuous, selfish, and sensual self-seeking.

4. The Wholly Egocentric Life Presents a Most Frequent Problem. A self-directing, self-governing strong individual may become too far individualized. He may become egocentric in his possessions, selfish, and cruel in his business, proud and arrogant in his powers, bigoted in his opinions and prejudiced in his views, leading him into idiosyncrasies in his thought and conduct.

The only answer or solution is to socialize such an individual, to show him that he is receiving the benefits and therefore should become and recognize himself as a member of the great human society. He should be brought to see that in the long last it is only by the identification of his own good with the universal good that he can partake and share in the higher values of life; that only as his own peculiar individuality is permeated by the universal elements of human life does he become a real personality, an incarnation of humanity at its best. The centrifugal force which will cause him to be outgoing is essentially religious, the recognition of God as Father and the direction of his life toward his brothers in social bonds and service. This is the heart of Jesus,

saying, "Whoso shall lose his life for my sake shall find it." This is also the law of the kingdom of God.

The demands of simple humanitarianism, of social sanctions, of a high morality, and above all of the Christian religion, declare to the self-centered egotist that there must be a limitation and sublimation of egoistic drives, with a surrender to and an acceptance of the good of all.

The egocentric life may be based on physical or sensuous enjoyment. The man may, perhaps unconsciously, allow the drive for sensual satisfaction to have full sway in his life without regard to the effect on others. Or his egoistic impulses may take a turn toward the refinement of sensuality into mere sensuousness, the aesthetic sense at the expense of moral qualities, such as painters who were "too great to be bound by morality." Or as Shelley, "who had no opinions except on matters of beauty."

The answer to those who are set in their sensuousness and sensuality is that fleshy desires wreak their own vengeance. "He that soweth to the flesh shall of the flesh reap corruption; but he that soweth to the spirit shall of the spirit reap life everlasting," is written not only in the Book but in the cosmic nature of things. A state of happiness, of beatitude satisfying to all the demands of life, comes only by obedience to the laws of the spirit.

It is the duty of religious teachers, preachers, and practitioners to assume that no man comes to himself in his highest manhood until he is adjusted to spiritual reality; that this adjustment is as vital and real as his body to his environment, his mind to truth, and consists in his relation to abiding timeless laws of the cosmic world as revealed in the Master Teacher, Jesus,

The slightly abnormal personality brings to the counselor numerous problems:

1. Some are overemotionalized and naturally run to religious matters. An overemotionalized type, with very narrow, bigoted knowledge, brings to the counselor men "with a supreme mission," fanatics who have one cure for all the world's ills, men with "fixed ideas" which have become compulsions and may run from one cult to another, the more occult or "sexy" the cult the more attractive. Of this type is the large woman who stated that "she was very lonesome until she developed her stomach trouble."

An attempt at help may be made by desensitizing, by getting a patient to treat the matters objectively. "Yes, but why get so excited? If it is true, it will work out as you say." With an "idee fixe," suggest other possible solutions, but not in such a way as to arouse feelings of resentment or anger; or a harmless fanatic may be turned into a mentally ill one. Do not argue.

The counselor must be warned that there is a "lunatic fringe" which naturally gravitates to either a "consultation clinic" or a church clinic, and he may be so imposed upon, and find his time so utterly wasted, that he may come to the cynical belief that humanity is made up of the neurotic and the erotic. The overenthusiasm of young counselors under forty will by experience be transmuted into a long-suffering sympathy with all these types. "Inasmuch as ye have done it unto one of the least of these."

2. Meeting the slightly subnormal individual is a complicated problem. There are some persons intellectually incapable. They simply cannot meet the complexi-

ties of modern life. Psychiatric examinations of those on relief show that many are not capable of anything but the simplest directed work. With them there may have been some maladjustment or unfortunate experience somewhere in early life. "I have never gotten off on the right foot." "I never had a chance in life." This sense of inferiority which has built itself into a complex requires probing into memory and a relief by catharsis, and a direction of life into work where achievement may be made and self-respect re-established.

The counselor may tactfully draw from the person an admission of his own limitations and then endeavor to direct his life into simpler channels. The aid of social-service agencies may be invoked, but an adviser, out of kindness, must not promise employment or paint too rosy a picture of the possibilities, or he may find himself involved in serious difficulties. A note of introduction given a man to a bank is considered by the bank as an endorsement, and the bank may look to the author of the note for settlement of any losses.

There is a place for the work of a religious counselor in certain types of mental distress. There are certain cases in which the origin of the trouble seems to lie in disharmony of the soul. Perhaps forgiveness has been withheld from another and an injury has been brooded upon for many years. Or possibly a sin has been committed long years ago and, unforgiven, has poisoned the mind. A physician of souls is needed for this type of case, one who has received a psychological training and has had psychological experience as well as experience in dealing with the more ordinary spiritual needs of men and women,



In dealing with all problems of personality adjustment, as above given, there is a definite routine to be followed which may be stated as follows:

A. One must get the setting of the man's life—his personal history through the questionnaire, his family, his friends, and working and living conditions, his disposition and character, his mental and physical capacities, his degree of integration in character.

B. A re-education in relation to himself and his surroundings. The patient must be sincerely in earnest in his desire to readjust himself and must be sincere in asking help of the adviser. He must be made aware that no one can make the adjustment for him and therefore he must not throw upon the counselor the burden of making the adjustment for him, and the adviser must resist the temptation to thrust upon the advisee a ready-made solution. The counselor must lead him to a reconsideration of his problem, bring to his mind facts or data which he may have overlooked or which he may have emotionally rather than objectively treated. He must arouse in the patient desires and motives which will reinforce each other through appeals to or stimulation of his dominant desires, his best sentiments, his ideals, and his ethical standards of truth, loyalty, and chivalry around which all the rest of his life must be integrated.

C. A redirection of his energies through the finding of new goals, as means of expression for his emotional life. A sublimation of his drive for sex in creativeness; his drive for power in tasks which will give him a sense of achievement; his drive for comfortable living in finding satisfaction in simple pleasures of life and less dissatisfaction through envy.

D. Increasing his physical vitality so that the threshold of resistance is made higher (surmount more difficulties; fewer things will annoy him). Directing his attention to the use of resources which may be utilized by him—at home, economic, spiritual or social, fraternal or collegiate, and all social agencies as above.

In conditions which cannot be changed there should be an honest facing of the problem, the analysis of the problem into its elements and an evaluation of each element. Anxiety enlarges problems, and a clear, concise analytical statement dissipates the emotional fear and gives courage for the task.

E. As a last resort, putting the patient in a situation arranged to help, such as hospitals, sanitariums, psychopathic clinics, special schools, club work, recreation possibilities, and social-service agencies.

3. Meeting cases where the abnormality is to be classified as psychopathic. There are certain very clear and definite symptoms which indicate a neurotic or psychopathic personality, such as disorientation, delusions, definite phobias, persistent hallucinations, and all the abnormal indications of adolescent dementia. With these the religious counselor must be acquainted, as detailed under maladjustment, and the procedure is perfectly clear—the case must be immediately taken to a physician and a psychiatrist.

But there is a closely allied field of symptoms which should be carefully studied by the spiritual adviser in order that he may not involve himself in difficulty. There is the depressed type, who are "out of sorts," have "lost hope," and say "they might as well give up." This depression may be the initial symptom of a melancholia

which may result in suicide. The counselor should not assume responsibility of treatment in this type of cases. Obsessions and compulsions, continued anxiety states, and phobias of any sort are always danger signals, warning the spiritual therapist that he is "out of bounds" or rather that he is on dangerous ground.

The work of the spiritual adviser is further complicated by the fact that serious mental illness may exhibit symptoms that seem purely religious. The religious counselor must be constantly on his mental guard lest religious symptoms may be taken at their face value as part of a religious experience and not discovered to be symptoms of serious mental disorder. Schou, out of his wide experience in mental hospitals, says that in practically every form of insanity we may find fixed ideas of a religious character. And this applies to diseases arising out of definite and well-known organic causes, as, for instance, syphilitic cerebral paralysis, or arterio-sclerotic mentia (senile dementia). Even in alcoholic delirium the patients may have revelations of eternal bliss or suffer the tortures of hell.

"The majority of mental diseases reveal the total content of the patient's consciousness to a very great extent, and remove the mask which most people wear to a certain degree in everyday life. Mental trouble is thus a merciless exposure of ourselves. All that is inherent in the personality comes to the surface. Religious expressions become a powerful and violent factor in psychosis, because religion is a primitive tendency, a natural inclination, an instinctive craving which may be suppressed in many people in everyday life, but in psychosis breaks forth strongly and violently, inflexibly and uncontrol-

lably, resembling in this respect the sex instinct and the craving for food.”<sup>1</sup>

In the experience of a single counselor he has been called to pray and console three persons who had “committed the unpardonable sin.”

Case I: Young woman, 27—just after childbirth, very self-condemning—a case of puerperal delirium from shock of first birth. Cleared up in four weeks.

Case II: Unmarried woman, 30-32. Very violent. “Sure she was going to hell.” Referred to psychiatrist, who in routine examination discovered syphilitic infection. Entirely recovered after treatment, but had no further use for church or pastor.

Case III: Elderly gentleman, 71. Earnest Christian. Had endowed hospital. Weeping over his having committed the “unpardonable sin.” Pronounced senile dementia with unfavorable prognosis; could only offer spiritual comfort and assurance, but mercifully the patient went down to the end very quickly.

There is a definite routine which should *never* be departed from in dealing with psychopathic cases. The first necessity is to assure oneself that the trouble is psychological and not the manifestation of a physical condition. Therefore there must be first a thorough physical examination. In all cases which involve more than the need of moral and spiritual advice there should be secured the best diagnosis and medical care obtainable. This necessity arises because a very large number of cases exhibiting nervous symptoms are now known to have definite physical causes. A metabolic test may show excess or

<sup>1</sup> Schou, H. T., *Religion and Morbid Mental States*, New York, 1930. Used by permission of Methuen & Co., London.



deficiency of thyroid secretion; hypertension of the blood vessels causes psychical troubles; the digestive and elimination areas may affect the general feeling tone adversely; the neurologist may discover definite organic nerve defects or disease.

The next routine step is to utilize spiritual therapy in psychopathic cases only, with the consent, by the advice, and under the direction of the psychiatrist. There are cases of mild hysteria, and neuresthenia in which the psychiatrist may seek the aid of the spiritual therapist, in which situation the counselor is to use all the methods of confession, re-education, and suggestion as outlined.

There must be a very simple and plain teaching as to the means of utilizing and assimilating the spiritual forces which surround life. A very large number of treatises are available at present on the use of spiritual power in health and illness, and these may be given to the counselee, but more important is direct personal guidance on the part of the counselor.

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## CONCLUSION

### THE SUPERPOWERED PERSONALITY

**F**ROM the dead ashes of the atheistic, materialistic, behavioristic psychology, with its fatalism, futility, and frustration, there has arisen a new Phoenix in the form of a free, self-controlled, unified personality adjusted to both the material and spiritual realities. This re-discovery of personality has arisen from two movements, one theoretical, and the other practical.

In medicine, psychiatry, and psychology there is an increasing emphasis on the total personality. Reading the recent works of Jung and Link in psychology, and Hart and Campbell in psychiatry, there appears a new emphasis on the place and power of a unified personality. This recognition of the total person had been implicit in the teaching of McDougall and White, but the fact that the "organism as a whole" must be recognized in dealing with any part, has become an axiom in medicine, psychiatry, and psychotherapy.

The practical discovery of personality resulted from the fact that world direction has suddenly shifted from mass movements to domination by personalities. Make the circle, Mussolini, Hitler, Lenin, Stalin, Mustapha Kemal, Gandhi, Chiang Kai-shek; to our own dynasty of Roosevelts, T. R., and F. D. R., and ?. Everywhere there is the direction, for good or evil, of powerful individuals.

One influence which has led to this rebirth of personality is what might be called the dematerialization of

power. Barnes gives us this interesting picture. He says that if all the vibrations of light, heat, and power, which are known by scientists to exist all around us, were represented by sixty pianos placed in a row, then the total range of vibration of which a human being can be aware through his unaided senses would be represented by one piano. In other words, for the world which we know by our unaided senses there are all around us fifty-nine other worlds. It is tradition that Rodger Babson once asked Doctor Steinmetz, the research expert for the General Electric, what the next great source of power would be, and that Steinmetz replied, "The realm of the spiritual; we have hardly touched that as yet."

Einstein says that in a very far future the average man may be as high above Galileo as Galileo was above a Papuan. In every naturalist he declares there must be a kind of religious feeling; for he cannot imagine that the connections, into which he sees, have been thought of by him for the first time. He rather has the feeling of a child, over whom a grown-up person rules. Religion is to relate men to that spiritual power, and only as men's minds are so related do they become in the highest meaning human beings. "The deepest-seated instincts are those of admiration, awe, and reverence, and these deepest instincts are those which in human souls are called religious," says McDougall. Men have always had this feeling of dependence, awe, and reverence which arouses the religious life. "Great men are the men in whom God has succeeded; weak men are God's failures," is the conclusion of Amiel in his intimate *Journal*.

Eucken, the last of the great German philosophers, gives as an axiom, "If a man enters into and conforms

to the spiritual life, he becomes what he was meant to be, a son of God; but if he refuses the life of the spirit and cuts himself off from it, he sinks into what he was not meant to be. He loses the characteristics of humanity; he sinks, as it were, to the level of the lower species." Modern scientific thinking is coming to a realization and recognition of this supraphysical energy. Eddington acknowledges that the religious interpretation is as valid as that of the scientist. The ultimates of physics can be measured, the ultimates of love and worship cannot; this, he says, is their only difference. The basal stuff of the world lends itself to measurements that give us the world of physics and also to the immediacies that give us religion, or love, and art; and, he concludes, religious thinking is as much entitled to interpret reality under its symbolism as the physicist to interpret under his mathematical symbols.

Supermen, who have changed the course of history into higher channels, have been men who were supercharged with this higher power of the spirit. Christ, Paul, Augustine, Luther, Wesley, Wilberforce, Kagawa, E. Stanley Jones, Albert Schweitzer, and the million more who "followed in their train," were all men who were endowed with the sufficing energy of the Eternal Spirit.

It is to be noted here—and the amateur economists and tyro-politicians should grasp this—that the testimony of religious history is that always there is *first* the *man* transformed and supercharged with the divine will, who *then* goes out to change the world and adjust the world to the will of God.

We have just begun to find the possibilities of humanity, and today it seems as though our material develop-



ment has outrun our mental, moral, and spiritual life. We are still "candidates for humanity" in every part of life. It is no reproach to say that "not everyone is religious" any more than to reflect that not everyone is intelligent or artistic, nor as human, as distinguished from subhuman motivation. Humanity is on the long, long upward march and with Emerson we must say, "I am always right if I only see far enough," and one must see with Hugo that "God makes a step and ages have passed away."

In this wild, whirling world religion has a task which no other force can accomplish. First, the enlargement of human life until men can naturally and easily appropriate and assimilate spiritual energy to give them a place of stable security and dynamic in order to maintain their lives against all assault. This sense of security and purpose is the greatest contribution of religion to the troubled mind of today, and is a powerful prophylactic against all maladjustments. Just as a healthy body resists the attack of disease germs or destroys them rather than play host to them, so a sane, healthy, well-balanced personality rejects anxiety, fear, and the brood that bear mental ill health. So all the spiritual ministry to life, building up hope, courage, and the "abundant life," wards off mental distress and disaster.

The second task of religion is to direct all the powers of spiritually charged human life into the task of reforming and recreating the social structure on the principles of justice, righteousness, truth, and brotherly love as set forth by Jesus in His ideal of the kingdom of God. The environment of life must be reconstructed so that instead of being destructive to so great a part of the

"human plant," it may be nourished, protected, watered, and sunned by its material and spiritual surrounding until it blooms into the perfection of the likeness of the "lily of the valley, or the Rose of Sharon."

Browning sang the long view:

"Progress is  
The law of life. Man is not man as yet.  
When the host  
Is out at once to the despair of night:  
When all mankind alike is perfected,  
Equal in full-blown powers, then, not till then,  
I say, begins man's general infancy."

Two voices of prophecy, one adapted from John: "And I, John, saw the holy city, the new Jerusalem, . . . and I saw no temple therein: for every man knew God from the least even to the greatest." The other from the mystic poet Blake:

"I will not cease from mortal fight,  
Nor shall my sword sleep in my hand,  
Till we have built Jerusalem  
In all our green and pleasant land."

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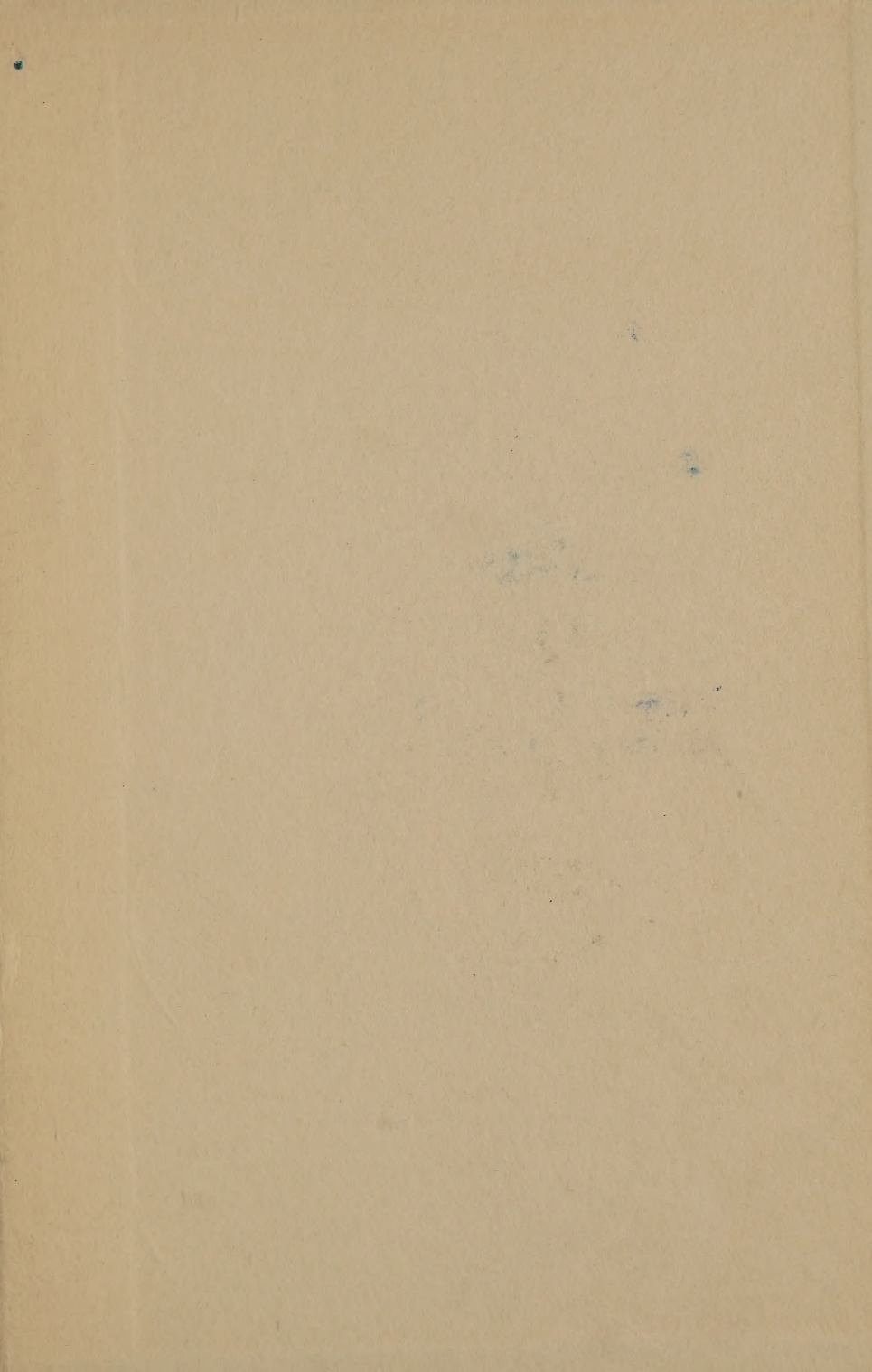


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D 8 - '41	Bon		
D 22 - '41	Bon		
RESERVE	RESERVE	RESERVE	
RESERVE	RESERVE	Bon	
Ap 22 '43	Cure of Souls		
My 1 '44	RESERVE		
JI 5 '45	<del>RESERVE</del>		
JI 11 '45	<del>RESERVE</del>		
Ag 15 '45	<del>RESERVE</del>		
F 21 '47			
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